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ABSTRACT

The report summarizes the status of 49 Oregon projects funded during the 1976-77 academic year under Title VI-B funds for preschool, elementary, and secondary handicapped children. Evaluations on each project usually provide the following information: title of project, location of project, population served, funding allocated, project beginning and ending dates, background and rationale, methodology, objectives, and third party evaluator's comments. Among entries are the following projects: Parent Education Project, Pre-Primary Learning Disability Prevention/Intervention, Autistic Satellite Classroom, Intercept-An Educational Resource Program, Preschool Program for Children of Families with Special Needs, Normalizing Education for the Handicapped, Yamhill County "Early-In", Early Childhood Outreach Through Parent Training, Special Preschool Home Project, Providence Raises Awareness in Stimulating Environment, Portland Developmental Kindergarten, Middle School Program for Identified Severely Learning Disabled Students, and Itinerant Teacher of the Hearing Impaired in Malheur County. An introductory section explains the evaluation plan, reviews the results of Title VI Oregon projects, and outlines recommendations. (SBH)

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IMPACT II

of the

TITLE VI PROGRAMS

in the

STATE OF OREGON

September 1976 - August 1977

This report was prepared under the auspices
of the Oregon Board of Education

by

The Teaching Research Division of the
Oregon State System of Higher Education

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Table of Contents

Advisory Committee iii
Introduction v
Evaluation Plan viii
Results and Discussion xiv
Recommendations xviii

Projects Listed by Title:

1. Diagnostic-Prescriptive Center 1
2. Parent Education Project (PEP) 17
3. Pre-Primary Learning Disability Prevention/Intervention . . 29
4. Hope for the Learning Disabled Child 35
5. Skills Center for Socially and Emotionally Handicapped . . 39
6. Baker IED Speech Therapy for Special Education and Preschoolers 49
7. Baker County IED Program for Visually Impaired Children . . 55
8. Autistic Satellite Classroom 67
9. Intercept - An Educational Resource Program 85
10. Prescriptive Classroom for Learning Disabilities 95
11. Coos Regional Program for Hearing Impaired Students 107
12. Preschool for Multiply Handicapped 117
13. Coos Regional Program for the Visually Handicapped 121
14. Preschool Program for Children of Families with Special Needs 125
15. Mainstream: Accommodation Services for the Handicapped . . 141
16. Resource Consultant for the Emotionally Handicapped 149
17. Education Evaluation Center 161
18. Normalizing Education for the Handicapped 167
19. Interdisciplinary Team - Diagnostic 177
20. Program for Learning Disabled and/or Emotionally Disturbed Children 181
21. Parent Readiness Education Project 185
22. Child Evaluation Center 189
23. TMR Classroom 197
24. Yamhill County "Early-In" 201
25. Early Childhood Outreach Through Parent Training 213
26. Jackson County IED Program for Visually Handicapped 220
27. Teaching Research Infant and Toddler Classroom 229
28. Integrated Handicap Preschool - Learning Disabilities . . . 251
29. Contingency Management 257
30. Special Preschool Home Project 267
31. Senior High Educational Resource Center 273
32. Mainstreaming Exceptional Children 277
33. Early Prescriptive Intervention for Children 295
34. Autistic Educational Project 309
35. Child Neurology Clinic 319
36. Providence Raises Awareness in Stimulating Environment . . 327
37. Vocational Education for the Severely Handicapped 337
38. Early In - "Validation" 345
39. Portland Developmental Kindergarten 351
40. Speech Therapy Program 373

41. Redmond High School Handicapped Program 381
42. Adjustive Education for the Emotionally Handicapped 385
43. Full Services Project 395
44. Classroom Intervention for Emotionally Handicapped 405
45. Preschool Education for the Deaf 411
46. Preschool Language, Speech and Hearing Services 421
47. Therapy for Emotionally Disturbed Children. 427
48. Middle School Program for Identified Severely Learning Disabled Students 433
49. Itinerant Teacher of the Hearing Impaired in Malheur County 443

Projects Listed by Location:

1. Albany 1, 17, 29
2. Aurora 35
3. Baker 39, 49, 55
4. Beaverton 67, 95
5. Cottage Grove 85
6. Coos Bay 107, 117, 121
7. Eugene 125, 141, 149
8. Gold Beach 161
9. Independence 167
10. Klamath Falls 177, 181
11. Lakeview 185
12. Marylhurst 189, 197
13. McMinnville 201
14. Medford 213, 220
15. Monmouth 229
16. Mt. Angel 251
17. Oregon City 257
18. Philomath 267
19. Phoenix 273
20. Pleasant Hill 277
21. Portland 295, 309, 319, 327, 337, 345, 351
22. Redmond 373, 381
23. Roseburg 385, 395
24. Salem 405, 411, 421
25. Springfield 427
26. Troutdale 433
27. Vale 443

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The Impact in the State of Oregon of Title VI of the Elementary and Secondary Education Act of 1965 as Amended

September 1973 - August 1974

Introduction

Title VI of the Elementary and Secondary Education Act of 1965, P.L. 89-750, as amended, authorizes that U. S. Commissioner of Education make grants for the purpose of assisting states in the initiation, expansion and improvement of programs and projects for the education of handicapped children at the preschool, elementary and secondary school levels. The term "handicapped children" includes the mentally retarded, hearing impaired, deaf, speech impaired, visually handicapped, seriously emotionally disturbed, crippled, or other health impaired children who because of their handicaps require special education and related services.

Foundation of the Title VI program within any state is the State Plan, the contract or agreement between the state and the U. S. Office of Education, for the operation of programs and projects for handicapped children at the preschool, elementary and secondary school levels. The plan submitted by the State of Oregon was approved by the State Board of Education on April 10, 1968, with an effective date of April 18, 1968. This plan was approved by the United States Office of Education on May 5, 1968.

This State Plan described the present statewide educational program for handicapped children. This description is excerpted and included as Annex A of the publication, Impact of the Title VI Programs in the State of Oregon. The State Plan described the procedures for the administration of Title VI within the state.

In order to determine which projects were funded under the Title VI program, the Oregon Board of Education, with the assistance of the Advisory

Committee, defined and selected the following criteria for establishing priorities for funding projects and programs:

1) The extent to which the project will provide special education services to categories of handicapped children who are not being served or served adequately through the state reimbursed handicapped child program.

2) Adequacy of description and documentation of the need for the special education service desired in the project.

   Highest priority to projects that stress unmet needs by documenting the number of handicapped children needing the special education service proposed.

3) Extent to which the project stresses early identification of handicapped children and includes aspects of early treatment.

   Highest priority to projects that provide preschool special education services to handicapped children.

4) Adequacy of the project procedures for identifying the handicapped children to be served.

   Highest priority to projects that provide adequate diagnostic provisions for selecting children in need of the special education service.

5) Extent to which the project is of sufficient size, scope and quality to give reasonable assurance of meeting the educational needs of the handicapped children to be served.

   Highest priority to projects that provide special educational services focused on manageable numbers of handicapped children qualifying for the service and to projects that are designed to provide comprehensive service to these children.

6) Evidence of supplementation of the regular school program by the proposed project or program.

Highest priority to projects that make specific and realistic plans for integration into the regular school program of the handicapped children served by the project.

7) Extent to which other community and state resources are represented in the planning and operation of the project or program.

Highest priority to those projects that make full use of other community and state resources that are able to assist in the planning and operation of the project.

8) Provisions for evaluating the effectiveness of the special education services to be provided in the project.

Highest priority to projects that include specific evaluation procedures that are consistent with the objectives of the project appropriate for the services provided.

9) Provisions for participation of qualified, nonpublic school handicapped children in the project.

Highest priority to projects that make provision for participation of eligible handicapped children enrolled in private schools in the area to be served by the project.

10) Adequacy of the size and qualifications of the staff.

Highest priority to the projects employing or purchasing the services of well qualified staff and with a high enough ratio of project staff to the number of handicapped children to be served by the project to ensure effective service.

11) Adequacy of facilities, both existing and proposed, for conduct of the project or program.

Highest priority to school facilities that are already available to the district and considered appropriate for the needs of the project.

12) Economic efficiency of the proposed project.

Highest priority to those projects listing a detailed budget of estimated amounts of funds required for operation of the project and for cost-service ratios that are consistent with the special education services to be provided.

The policies and procedures under which Oregon initiated, approved, and conducted state programs and projects and local programs and projects were described completely in Impact of the Title VI Programs in the State of Oregon. Essentially, this procedure involved school districts submitting applications for Title VI monies. These applications were reviewed by the Advisory Committee who determined recommendations for funding of applications. These recommendations were approved by the Oregon Board of Education who then notified the applying districts.

Evaluation Plan

From the inception of the Title VI program within the State it was determined that Oregon should have, as part of its Title VI operation, a Third Party Evaluation. Consequently, the State Department of Education contracted with Teaching Research, a Division of the Oregon State System of Higher Education, for consulting services for the development of an evaluation program for Title VI in Oregon. The report of the evaluation of the Summer 1968 program is contained in Impact of the Title VI Programs in the State of Oregon. This evaluation model was considered so acceptable by not only the Oregon State Department of Education but also by the United States

Office of Education that it was continued for subsequent funding periods. The following is a summary of Third Party Evaluators for subsequent Impact Reports:

Year	Report	Third Party Evaluator
1968-69	Impact 2	Teaching Research
1969-Summer	Impact 3	University of Oregon
1969-70	Impact 4	Teaching Research
1970-71	Impact 5	Teaching Research
1971-72	Impact 6	Teaching Research
1972-73	Impact 7	Teaching Research
1973-74	Impact 8	Teaching Research
1974-75	Impact 9	Teaching Research
1975-76	Impact 10	Teaching Research

The third party evaluation was conducted in Oregon using the following model: After the projects had been selected for funding by an Ad Hoc Advisory Committee, research consultants from the Teaching Research Division and the Coordinator of the Title VI programs within the state met with each of the project directors prior to the commencement of the project. The purpose of this meeting was to finalize an evaluation plan for the particular project. This final evaluation plan entailed the determination of which measurement instruments were to be used and the method of conducting the measurements with these instruments.

During the school year Teaching Research consultants visited each project twice to insure that the evaluation procedures were being provided as planned. Special Education consultants of the State Department of Education visited projects associated with their speciality, not only serving as advisors to project directors in the conduct of the project, but also concerning themselves with the progress of the evaluation. Finally, the Title

VI Coordinator visited each of the projects as a further check to insure that their progress and evaluation procedures were proceeding in accordance with the plan.

After the final report of each project was prepared and submitted by the project director, the results were examined, treated statistically where necessary, and determination made as to how successfully the project achieved its stated purposes. The results of that determination are reported herein.

The cost to the State for this Third Party Evaluation by the Teaching Research Division was $37,183, which included not only the initial planning with project directors and visits to project sites, but also the drafting of this report, including computer usage for statistical computations.

This evaluation plan which is utilized by the Oregon Board of Education to evaluate Title VI Projects has been selected as an exemplary model by Bureau of Education for the Handicapped (BEH), U. S. Office of Education in Washington, D. C. Staff from BEH have repeatedly indicated to staff at the Oregon Board of Education that this evaluation plan and the resulting Impact reports are unique in the United States. BEH staff are particularly impressed because the Oregon Title VI Projects have objectives that are stated in precise behavioral terms, evaluation strategies that are applicable to the objectives and result in an ability to demonstrate behavioral changes in handicapped children.

These components allow staff from BEH to present data to the legislature to substantiate that monies spent for Title VI resulted in positive changes in handicapped children. The result of this is that the federal money appropriated for services for handicapped children has been increased since the inception of Title VI in 1968.

From the summer of 1968 to 1976, 159 projects have been funded to 103 local education agencies in Oregon through Title VI-B funds. The Coordinator of Federal Programs at the Oregon State Department of Education expressed an interest in knowing what impact these projects have had on handicapped children in Oregon. Consequently, a contract was awarded to the Exceptional Child Research Program of Teaching Research, a Division of the Oregon State System of Higher Education, to conduct a survey of all projects that had been previously funded under Title VI-B funds to determine the current status of these projects as to the number of children they were serving, the number of staff used to serve the children and the number of dollars that were being expended. Consequently, the purpose of this report was to provide a current summary of the status of all projects funded between 1968 and 1973 under Title VI-B funds.

1. Between 1968 and 1973, $1,288,456 of Title VI-B Funds were spent in Oregon to provide service to 5,947 handicapped children in 133 projects conducted by 58 local education agencies. The average per child cost across all handicapping conditions was $217.
2. The deaf-blind and TMR populations in Oregon would not have been served had Title VI-B not been available between 1968 and 1970.
3. The allocation of projects to the various counties in Oregon appears to be appropriate as the majority of projects were awarded to the greatest areas of population.
4. In-service training was provided to 1,500 professional staff, volunteers and parents to assist local education agencies to successfully implement their projects.
5. Of all projects funded for an academic year, 87% are still operational on local, state or other federal funds.

6. Of all projects funded for the summer only, 44% are still operational.
7. For the 92 projects still operational, the original funding was $637,036. Current funding from other sources for these projects is $2,145,793, which reflects an overall increase of $1,508,487.
8. Of the $2,145,793 for continued projects, 54% is from local funds, 21% is from state funds, and 25% is from other federal funds.
9. The majority of the local education agencies indicated that the utilization of a third party evaluator allowed them to more adequately serve handicapped children.
10. The majority of local education agencies feel that staff from the State Department of Education and the third party evaluators provided them with sufficient and appropriate technical assistance.

More specific information and data are contained in the Summary Impact of Title VI-B Funds on the Education of Oregon's Handicapped Children. This document was prepared by Teaching Research for the Oregon Department of Education.

In 1972, staff from BEH encouraged staff from Oregon Board of Education and Teaching Research to train other state departments to use this evaluation model. The following paragraphs describe the training conducted for 46 states, Puerto Rico, The Bureau of Indian Affairs, and the District of Columbia.

Eight training conferences on the Utilization of Third Party Evaluation Model were conducted for 90 participants who came from 46 states, Puerto Rico, the Bureau of Indian Affairs, and the District of Columbia. The three states that did not participate were Maine, Montana and New Mexico. The fiftieth state [illegible] Oregon.

The eight training conferences began January 30, 1973, and were completed February 1975.

At the conclusion of many of the training sessions for the Utilization of Third Party Evaluation Model, staff from various states indicated that they would be interested in implementing the Third Party Evaluation model if third party evaluators were available. It had been their experience that colleges and universities and others did not have sufficient information to act as third party evaluators in the way that we were describing in the training model. Based on this information the Teaching Research staff conducted a workshop in Chicago on April 15-16, 1975. Eleven persons were selected as potential third party evaluators and were provided two days of training. At the conclusion of this training session, a list of states was provided to the third party evaluators whose staff had previously indicated that they might be interested in employing a third party evaluator.

The Teaching Research staff provided additional on-site training to staff members of four states and the Bureau of Indian Affairs in 1975.

Results and Discussion of Title VI Projects in Oregon

Forty-nine projects were funded for the academic year September 1976 through June 1977. Of the 49 projects funded, 12 were located in the Northern part of the Willamette Valley, 20 were located in other parts of the Willamette Valley, and 17 in other parts of Western, Southern, Central and Eastern Oregon.

The 49 projects that were funded for the academic year 1976-77 served children in 8 different handicapping areas. Fourteen projects were funded in the area of the learning disabled, 10 projects in the area of emotionally disturbed, 3 projects for speech and language impaired, 3 projects for the hearing impaired, 10 projects for the developmentally disabled, 3 for the visually impaired, 5 in the area of educable mentally retarded, and 1 in the area of the severely handicapped. A total of 1,984 children were served in the 49 projects. The total dollars expended for these services were $1,501,500. The average cost per child for the academic year was $756.00. (See Table 1.)

In the area of the emotionally disturbed, 393 children were served for $315,000, which represents 20% of the total children served by all projects. Children with extreme learning problems were served for $425,100, which represents 29% of the total. Most of the projects for the hearing, visually, speech and language imparired were seen on an itinerant basis twice or three times per week for a specified number of minutes each day, while the remainder of the projects were for the most part served in a regular classroom on a full time basis. Consequently, the number of hours and minutes of service provided to each child for the costs involved are varied greatly from one handicapping condition to another. Table 1

Table 1

Summary of Projects Funded for 1976-77

Handicapping Condition	No. of Projects	No. of Children Served	% of Total	Dollars Funded	% of Total	Cost Per Child
Emotionally Disturbed	10	393	20	$ 315,000	21	$ 802.00
Visually Impaired	3	61	3	130,600	9	2,141.00
Hearing Impaired	3	59	3	71,400	5	1,210.00
Developmentally Disabled	10	627	32	288,800	19	461.00
Educable Mentally Retarded	5	91	5	144,500	10	1,588.00
Learning Disabled	14	583	29	425,100	28	729.00
Speech & Language Impaired	3	123	6	46,100	3	375.00
Severely Handicapped	1	47	2	80,000	5	1,702.00
TOTALS	49	1,984	100%	$ 1,501,500	100%	----

provides a breakdown of the number and type of projects, number of children served and dollars expended by handicapping condition for this funding period.

For the fifth consecutive year heavy emphasis was placed in funding projects for the emotionally disturbed. Those 10 projects funded in the area of emotionally disturbed, utilized the resource room concept. This approach entails taking children from the regular classroom for varying periods of time depending on their needs. Assistance is provided in academic areas as well as programs being conducted for various behavioral problems. Children return to the regular classroom for longer and longer durations sometime during the school year as the behavior begins to reach criterion level of acceptable performance set by the regular classroom teacher. In addition, training is provided to each child's classroom teacher, so that she may utilize the same procedures used by the special teacher in the regular classroom. Another potential benefit of this concept is that the classroom teacher could then generalize the use of this concept to other children in her classroom. It is the opinion of the third party evaluator and the State Department of Education that this is a desirable way of training children with deviant behaviors.

The project conducted at Portland State University which focused on training autistic children should receive special recognition because of its two year history of success. Data have been submitted again which demonstrate dramatic gains by this population of children. The project is collecting much of their data on children outside the school environment. The project staff have developed training procedures and materials which can be used as a model for other professionals to use who serve similar populations. These procedures include: (1) training for autistic children in language, self-help and the reduction and elimination of behavior problems; (2) maintenance and generalization of these skills in other settings; and (3) the inclusion of parents and surrogate parents to administer training programs with their children.

The project staff should be encouraged to develop these procedures in package format so that they may be distributed to other professionals. In addition, they should also be encouraged to develop a short term in-service training program so that other professionals can successfully utilize their procedures. This staff is to be commended for outstanding contributions to special education and to handicapped children.

The Autistic Satellite Classroom in Beaverton School District must also be cited as being exemplary. This project would be considered an outstanding project in its 2nd or 3rd year, but the accomplishments as a first year project are particularly impressive. The project's third party evaluator's brief and accurate comments clearly describe this project. Congratulations!

RECOMMENDATIONS

Title VI-B has been amended by Public Law 94-142 which results in a change in the distribution of funds. Over the past several years VI-B funds have been made available on a competitive basis to school districts throughout the State. As a result of Public Law 94-142, most of those monies will be provided to districts, but on a direct flow-through basis. The new Public Law does make provisions for the State Department of Education to use a portion of the monies for discretionary purposes, and therefore allows the State Department some flexibility in choosing and supporting a few projects.

The present use of those discretionary monies has been to support regional programs for the deaf and regional programs for the blind, as well as a few selected projects that deal with low density, high priority handicapping conditions.

The major recommendations in this report will, therefore, differ considerably from previous VI-B reports to coincide with the federal guidelines as indicated in Public Law 94-142.

1. The State Board of Education should continue to financially support selected projects through focus on low density, high priority handicapping conditions.

Rationale: These projects are typically extremely expensive. They usually require some kind of specialized training and a very heavy staff-to-student ratio. At the present time, because of their extraordinary expense, it is very difficult for the local education agency to be able to cover all of the expenses required. The autistic program at Portland State is a good example. If a school district is going to eventually become responsible for conducting these programs, it will be necessary for them to have information about the most effective and efficient procedures for handling these children. These State-supported projects should be viewed, therefore, as demonstration projects and be given the mandate to carefully document their activities and experiment with practices and procedures to determine the most efficient and effective ways to incorporate these programs at the LEA level.

2. The Oregon Board of Education should continue the Title VI-B philosophy of using the federal monies for "seed" money while encouraging the local districts or the State Legislature to allocate dollars to support these programs.

Rationale: The federal money cannot be used to supplant State and local agency monies. In the past, the State of Oregon has the best record of any state in the United States for utilizing these federal Title VI-B monies as seed money for projects which are subsequently picked up and incorporated into the regular LEA program. The success of this program has not been related to any one particular type of project, but it was announced in the beginning that the federal money would terminate and successful projects would have to be picked up locally. Because of the guidelines given to the projects by the Oregon Board of Education which stress the importance of quality projects and the need to carefully document the impact, it has been possible for the projects to have sufficient data to convince LEA administrations of their worth. The emphasis for quality programs should not be diminished in the State-supported projects. Each project considered by the State Board of Education for funding should be accompanied by a timeline which specifies the activities that will be conducted that will eventually enable the project to be picked up by other than federal funds. It has been shown in the past that when this planning occurs early in the project, and specific steps are taken, the probability of achieving local funding is increased.

Title of Project:	Diagnostic-Prescriptive Center
Location of Project:	Albany Elementary School District #5
Population Served:	34 Learning Disabled Children
Funding Allocated:	$23,500
Project Beginning Date:	July 1, 1976
Project Ending Date:	June 30, 1977

Background and Rationale:

During the 1975-76 school year, the Albany Child Evaluation Center, under District and Title VI-B, EHA funding, provided diagnostic-prescriptive services for 35 severely learning disabled children.

In the past, these children would have been referred to outside agencies and district records from the previous two years indicate that 78% of those children would have gone unserved due to lack of transportation, inability to keep assigned appointments, expense and time required for parents to take children to distant evaluation centers, and length of waiting lists. In those cases where an evaluation was completed by an outside agency, recommendations were most often not specific or detailed enough to allow easy translation of diagnostic information into meaningful education program in the classroom. In addition, outside agencies were unable to assist in either the implementation or follow-up of suggested treatment programs.

In no case during 1975-76 did a child, in need of Center services, go unserved. The continuing need for the Child Evaluation Center in Albany, where local diagnostic-prescriptive services, implementation of specific and meaningful recommendations, and ongoing follow-up of pupil programs, was clearly evident.

The severity and complexity of problems and needs exhibited by children seen by the Center during 1975-76 suggested that a long term follow-up component should be built into the program. Such an added component would insure the continuation of appropriate delivery of services to those children beyond the 1975-76 school year.

The need for ongoing services to this group of severely learning disabled children during 1976-77 was four-fold:

1. Children evaluated by the Center during 1975-76 to be re-assessed for appropriate placement in curriculum skill areas in the Fall, 1976;
2. Instructional program prescriptions to be updated based on current re-assessments and include recommendations for specific methods and materials to be used with each child;
3. Assistance to teachers and building Support Services specialists for implementation of instructional programs to be provided as needed; and
4. A monitoring system developed to provide a record of specific skill gains and program effectiveness.

During 1975-76, parental involvement in the evaluation and particularly the follow-up was minimal. Parents assisted primarily in providing a case history, participating in the conferences at the conclusion of the evaluation day, and received a copy of the written evaluation report. They also received a minimum of two progress reports during the school year.

It was of concern that parents were provided with little opportunity to actually participate in the remediation of their child's disability. Further, a majority of the parents expressed a desire to receive additional information regarding learning disabilities and, in particular, the specific problems of their own children.

In order to provide parents with the necessary understanding and skills to reinforce the school instructional program, it was necessary to provide training in specific teaching techniques, to provide materials and skill packets, and to develop a monitoring system for use in the parent/home program.

In summary, the major areas of focus in maintaining and refining an effective Child Evaluation Center during 1976-77 was:

1. Provide extensive psycho-educational assessments and prescriptive programs for severely learning disabled children referred during 1976-77 according to the model implemented during 1975-76;
2. Provide ongoing follow-up services for learning disabled children who were evaluated by the Center during 1975-76; and
3. Develop and implement an effective parent/home program which would provide parents with the understanding and training to assist with the remediation of learning problems at home, as well as specific materials and techniques for use in the home as part of the total remediation program.

Methodology:

Implementation of the Diagnostic-Prescriptive Model during the 1976-77 school year was four-fold. One, it provided a thorough evaluation by a team of specialists in the diagnosis of severe learning disabilities. The Center operated two days a week with a full staff: A psychologist, speech and Language clinician, learning disabilities specialist, methods and materials specialist, classroom teacher, and building learning disabilities specialist. During that time, a complete psycho-educational assessment was administered and a complete case history was obtained from parents to assist in determining the etiology of the disability. A post-conference was conducted at the conclusion of the evaluation which included the Center team, other support services staff who would be working with the child, the classroom teacher, and the child's parents.

The second component of the Diagnostic-Prescriptive Center was the provision of a prescriptive instructional program with specific methods and materials included. A conference was held with the classroom teacher and building learning disabilities specialist at the initiation of the program. Each was assigned to a specific section of the program and a method of record-keeping was established.

The third component of the program was the implementation and follow-up of the instructional program. During the year, there were 10 occasions when it was necessary to involve the entire Center staff in the scheduled follow-up sessions to revise and up-date programs. Routinely, however, the building learning disabilities specialist met every two weeks with the classroom teacher to make such revisions. On a monthly basis the Center staff met with classroom teacher and learning disabilities specialist to discuss the specific instructional programs prescribed for the learning disabled child.

The fourth component of the program included the re-assessment, development and implementation of the instructional program for children evaluated during the 1975-76 school year. The children were given an academic re-assessment in the fall of 1976. Prescriptive programs, implementation, follow-up and monitoring procedures were the same as described in the third program component.

The fifth component of the program was the parent/home program. Parents were provided with general information to assist in their understanding of children with learning disabilities as well as training in specific techniques and ideas to be used in the home. Classroom teachers indicated specific skill needs to the methods and materials specialist who in turn developed individual skill packets to be used by the parents. When the parents were finished with the packet, it was returned to the school and a new packet was developed.

Objectives:

1. By June, 1977, 35 severely learning disabled (L.D.) children will have received extensive psychometric, educational and speech, language and hearing evaluations; medical evaluations provided as indicated; to be completed within a month of the referral.

Evaluation: Record and report the learning disabled number of referred children evaluated. Record and report the scheduled evaluations. Completed evaluations will be on file and reported in support services offices.

Results: A total of 37 severely L.D. children were referred to the Evaluation Center. All 37 children received a complete psychometric educational and speech, language and hearing evaluation. A medical evaluation was provided as needed. A copy of the completed evaluation is on file in the support services office.

In addition, the Evaluation Center was able to accept referrals for psychoeducational services needed for an additional 42 handicapped learners within the district. As a result, the following children were also served:

10 children - Preschool age (referred through outside agencies such as medical profession, private preschools);

16 children - Educational Resource Center - EMR (evaluation for eligibility verification);

9 children - Developmentally Disabled - TMR (evaluation for eligibility verification); and

7 children - Pre-primary L.D. (determine eligibility for placement).

2. By June, 1977, 35 L.D. children will be given prescribed instructional programs based on their specific learning modality within two weeks following the evaluation; materials to be specified.

Evaluation: Record prescribed instructional programs within two weeks of the evaluation. Record and report the prescribed programs specifying methods and materials. The number of meetings held by the building L.D. specialist and the classroom teacher will be recorded and reported.

Results: A total of 37 L.D. children received a prescribed instructional program within two weeks of the evaluation. Five of the children were evaluated three weeks prior to closure of school and therefore after the initial instructional program was developed, further follow-up was not maintained.

The other 42 handicapped children who received evaluation services were not given a detailed prescriptive program. However, specific recommendations were provided where appropriate and some follow-up of the child's progress was maintained.

The prescribed instructional programs were initiated within two weeks of the evaluations. The specific methods and materials prescribed and utilized included various visual, phonetic, linguistic and combination strategies for each child evaluated in 1976-77 in the basic skill areas of reading, spelling, math, and handwriting. Similar materials were utilized for children who were evaluated in 1975-76 and received follow-up service. In addition, a program for fine motor coordination was included in the handwriting section.

A record keeping system was determined with each classroom teacher and L.D. specialist allowing for individual differences and preferences. Generally, the criterion-referenced inventory for the District reading program was used as well as criterion-referenced inventories developed by individual or groups of teachers, particularly in the area of spelling and math

3. To provide weekly conferences between the L.D. specialist and the classroom teacher.

Evaluation: A record will be kept covering the conferences held by the Center and/or building L.D. specialist with the teacher, and will be reported. A record will be kept covering the number of reports sent to the parents of the L.D. children. A log will be kept on the follow-up conferences and will be reported.

Results: A record of conferences was maintained by the building L.D. specialist and the Child Evaluation Center staff of conferences held with classroom teachers, other support services staff and parents. Written reports to parents were also recorded. Table 1 shows the number of conferences recorded by each L.D. specialist. School V was a private school which participated in the program and received services conducted by the Center staff throughout the year. Also shown is a record of the number of L.D. children evaluated and served by each building L.D. specialist. Each parent received a minimum of

Table 1

Conferences Conducted by L.D. Specialists and Center Staff

	School								Average # of
L.D. Specialist	I	II	III	IV	V	VI	VII	VIII	Conferences
Total number of children served	13	12	8	2	6	2	9	3	55 children
Classroom Teacher	213	47	43	4	24	76	30	10	8 children
Support Services	31	25	32	2	0	5	41	6	3 children
CEC	79	76	56	10	29	20	51	20	6 children
Parents	39	45	33	7	18	11	41	6	4 children
Written Reports-Parents	36	37	32	4	14	30	28	6	3 children

two written reports from the time of the scheduled evaluation. The building L.D. specialists conferenced with classroom teachers at least once every two weeks, and more frequently as needed. Members of the Child Evaluation staff conferenced at least monthly with both L.D. specialists and classroom teachers, providing services more frequently as needed.

4. Children evaluated during the 1975-76 school year will be provided an ongoing instructional program based on a re-assessment of readiness skills and a diagnostic prescriptive teaching model.

Evaluation: A record of learning disabled children and their pre-posttest data will be maintained. A record of prescribed instructional programs will be maintained. A record of progress on a criterion-referenced inventory will be maintained.

Results: (1) Twenty-four children were given a specific instructional program based on the diagnostic instruments used in the clinic by the end of September, 1976. (2) A specific instructional program was written for each child by the Child Evaluation Center staff, classroom teacher and other support services staff members when appropriate. (3) A daily record of progress was set up and maintained by the classroom teacher and building L.D. specialist. Posttesting was conducted during the month of May in order to determine specific growth in the basic areas of reading, math and spelling. Tables 2 and 3 show pre-posttest results for each child.

Child W and X were preschoolers who were placed in another special education program because of severe language deficiencies. Although specific test data were not obtained for these two children, they were followed-up on a monthly basis by the Child Evaluation staff.

In general, the children gained .6 to .7 months in reading as measured by an individual reading inventory (IRI) or the Peabody Individual Achievement Test (PIAT). The PIAT also indicated an average growth of .9 months in reading recognition, .3 months in spelling, and .8 months in general information. The overall academic gain for each child based on the PIAT was .6 months. Tables 2 and 3 also indicate that each child was served by the Center for the full nine month academic year.

Learning Disabled children who were evaluated during the 1976-77 school year were also given a specific instructional program based on diagnostic instruments used in the clinic. They also received the same test in May, 1977 to determine specific growth in the basic areas of reading, math and spelling. A daily record of progress was set up and maintained by the classroom teacher and building L.D. specialist.

Tables 4 and 5 show pre-posttest results for each of the 37 children. Of those 37 children who received an extensive psycho-educational evaluation, five were evaluated in May, 1977 and no pre-posttest data was obtained for them. Further, three other children transferred out of the district shortly following the evaluation and again no test data was available.

In general, the children gained .9 months in reading as indicated in IRI and PIAT Reading Comprehension scores. Based on the PIAT, there was also a .9

Table 2

Diagnostic Test evaluation for L.D. children who received follow-up services.

PIAT

Student #	Months of Service	Math			Reading Recog.			Rdg. Comprehen.			Spelling			General Info.			Total		
		Pre	Post	Gain	Pre	Post	Gain	Pre	Post	Gain	Pre	Post	Gain	Pre	Post	Gain	Pre	Post	Gain
A	9	3.1	4.4	1.3	3.3	3.3	0	3.2	3.1	-.1	3.0	3.2	.2	4.4	4.3	-.1	3.4	3.5	.1
B	9	4.2	4.6	.4	2.2	2.6	.4	2.6	3.1	.5	3.3	3.3	0	3.9	6.3	2.4	3.1	3.9	.8
C	9	Transferred out of District in October.																	
D	9	1.1	2.5	1.4	1.3	1.6	.3	.0	2.0	2.0	1.6	1.7	.1	3.2	3.9	.7	1.4	2.2	.8
E	9	.9	1.9	1.0	1.4	2.0	.6	2.0	2.4	.4	2.2	2.7	.5	.8	2.2	1.4	1.4	2.0	.6
F	9	5.3	5.7	.4	5.2	8.4	3.2	6.5	6.2	-.3	3.8	5.6	1.8	6.5	6.5	0	5.3	6.3	1.0
G	9	1.1	2.6	1.5	3.4	3.8	.4	3.1	3.1	0	3.4	3.7	.3	.5	1.4	.9	2.3	2.8	.5
H	9	3.2	3.3	.1	3.5	3.5	0	3.3	3.6	.3	3.8	4.4	.6	1.4	3.7	2.3	3.1	3.5	.4
I	9	5.3	6.4	1.1	4.2	4.8	.6	3.6	6.5	2.9	3.5	3.5	0	3.0	4.3	1.3	3.8	4.8	1.0
J	9	.4	.9	.5	.3	2.6	2.3	0	2.2	2.2	.8	2.2	1.4	.1	.8	.7	.5	1.6	1.1
K	9	3.3	3.3	0	2.0	3.4	1.4	2.6	3.3	.7	1.7	2.3	.6	2.9	4.3	1.4	2.5	3.2	.7
L	9	1.1	2.2	1.1	2.4	2.9	.5	5.3	4.2	-1.1	3.0	4.2	1.2	2.9	3.6	.7	2.8	3.5	.7
M	9	2.2	2.7	.5	2.0	3.0	1.0	2.5	3.3	1.3	2.2	3.5	1.3	3.5	4.5	1.0	2.5	3.5	1.0
N	9	2.5	4.6	2.1	2.2	2.8	.6	2.0	2.1	.1	1.7	3.0	1.3	3.2	4.2	1.0	2.2	3.2	1.0
O	9	3.4	3.5	.6	2.6	3.1	.5	2.8	3.5	.7	2.7	1.8	-.9	3.0	3.8	.8	2.7	3.0	.3
P	9	.9	2.5	1.6	3.6	4.7	1.1	2.5	2.7	.2	2.7	3.2	.5	1.3	1.9	.6	2.2	2.8	.6
Q	9	6.0	6.0	0	4.2	5.0	.8	3.7	5.5	1.8	3.5	3.8	.3	4.2	4.8	.6	4.2	5.0	.8
R	9																		
S	9	3.7	2.9	-.8	7.0	9.1	2.1	3.9	4.4	.5	7.7	3.7	-4.0	4.7	4.8	.1	5.1	4.8	-1.1
T	9	3.3	3.4	.1	3.3	4.0	.7	2.6	3.5	.9	2.8	3.6	.8	4.1	4.7	.6	3.1	3.9	.8
U	9	3.7	2.9	-.8	2.2	3.6	1.4	2.6	3.2	.6	2.4	2.2	-.2	5.0	5.1	.1	3.2	3.4	.2
V	9	2.1	2.7	.6	5.0	5.4	.4	3.6	4.4	.8	3.0	3.7	.7	4.1	4.7	.6	3.5	4.2	.7
W	9	Test information unavailable																	
X	9	Test information unavailable																	
Average months served:	.9	Average Gain:		.6			.9			.7			.3			.8			.6

Table 3

Student #	Months of Service	IRI			Phonics			Basic Recognition			Vocabulary			Roseburg		
		Pre	Post	Gain	Pre	Post	Gain	Pre	Post	Gain	Pre	Post	Gain	Pre	Post	Gain
A	9	3.5	5.0	1.5	86	100	14				2.0	3.0	1.0			
B	9	2.3	2.5	.2	80	93	13									
C	9	Transferred	out of	District in Oct.				92						81		
D	9	1.3	1.4	.1	18	85	67				20	115	95			
E	9	1.4	2.0	.6	76	96	20									
F	9	6.0	7.0	1.0												
G	9	2.1	4.0	1.9	75	87	12				3.0	4.0	1.0			
H	9	2.2	3.1	.9							3.0	3.1	.1			
I	9	4.0	4.5	.5	97	99	2				4.0	5.0	1.0			
J	9	1.0	1.3	.3	21	94	73	84	121	37	1.3	1.5	.2			
K	9	2.5	3.1	.6												
L	9	4.0	3.4	-.6	82	91	9				4.0	4.0	0			
M	9	2.0	3.0	1.0	92	97	5									
N	9	1.5	1.8	.3	85	99	14									
O	9	2.1	2.8	.7												
P	9	2.5	2.9	.4	82	98	16				3.0	5.0	2.0			
Q	9	4.0	3.2	-.8												
R	9							105	132	27				63	91	28
S	9	4.0	4.0	0												
T	9	3.5	4.5	1.0	91	103	12				3.5	5.0	1.5			
U	9	4.0	4.0	0	97	96	-1									
V	9	2.5	5.0	2.5	62	101	39									
W	9	Test	information	unavailable												
X	9	Test	information	unavailable												
Average months served:	.9	Average Gain:		.6			27 skills			32 skills			.8 95 words			28

Table 4

Diagnostic Test Evaluation for L.D. Children Evaluated 1976-77.

P I A T

Student #	Months of Service	MATH			RDG. REC.			RDG. COMP.			SPELLING			GENERAL INFO.			TOTAL		
		Pre	Post	Gain	Pre	Post	Gain	Pre	Post	Gain	Pre	Post	Gain	Pre	Post	Gain	Pre	Post	Gain
1	6	3.5	4.4	.9	3.8	3.8	0	3.3	5.3	2.0	3.0	3.7	.7	5.3	8.8	3.3	3.8	5.0	1.2
2	7	2.5	3.4	.9	4.4	4.5	.1	4.2	5.3	1.1	3.9	4.1	1.1	5.3	5.3	.0	4.2	4.6	.4
3	7	2.9	4.4	1.5	2.6	3.6	1.0	2.9	3.4	.5	3.5	3.5	.0	2.4	3.7	1.3	2.7	3.6	1.2
4	8	.3	1.4	1.1	1.8	1.8	0	2.0	2.0	0	1.7	1.7	0	.3	1.6	1.3	1.3	1.6	.3
5	5	2.3	1.9	-.4	2.4	3.1	.7	2.6	3.8	1.2	2.8	2.9	.1	2.9	3.8	.9	2.5	3.0	.5
6	8	1.1	1.3	.2	1.3	1.5	.2	0	2.0	2.0	1.1	1.2	.1	.3	.8	.5	1.0	1.3	.3
7	8	3.7	3.3	-.4	3.8	4.5	.7	3.7	4.5	.8	2.0	3.2	1.2	4.0	5.6	1.6	3.4	4.2	.8
8	7	4.2	5.7	1.5	3.0	4.4	1.4	3.8	6.8	3.0	3.3	3.3	0	4.5	5.1	.6	3.8	4.8	1.0
9	8																		
10	8		.9	.9		2.0	2.0		2.1	2.1		1.6	1.6		.3	.3		1.3	1.3
11	8																		
12	6	5.7	4.4	-1.3	6.2	7.0	.8	5.3	5.8	.5	4.4	4.1	-.3	4.7	4.8	.1	5.1	5.1	0
13	7	2.6	4.2	1.6	3.4	3.8	.4	3.6	3.6	0	3.8	4.2	.4	3.2	4.2	1.0	3.2	4.0	.8
14	8	1.4	3.1	1.7	1.6	1.8	.2	1.4	1.4	0	3.6	3.8	.2	1.1	1.6	.5			
15	8																		
16	8																		
17	4	1.4	2.6	1.2	1.3	2.0	.7	0	2.5	2.5	1.5	1.6	.1	3.0	4.3	1.3	1.0	2.6	1.6
18	5	2.3	4.4	2.1	1.8	3.0	1.2	2.4	3.1	.7	2.2	2.9	.7	3.0	4.2	1.2	2.2	3.4	1.2
19	5	2.6	3.7	1.1	2.8	3.0	.2	2.9	3.6	.7	2.4	2.9	.5	4.8	4.8	0	3.0	3.6	.6
20	6	5.3	6.0	.7	5.6	5.8	.2	4.7	5.0	.3	3.7	4.2	.5						
21	2	4.6	7.9	3.3	3.0	1.8	1.2	2.9	2.7	-.2	2.2	2.4	.2	7.8	10.1	2.3	3.9	4.0	.1
22	4	1.5	2.3	.8	5.0	4.7	-.3	2.7	5.8	3.1	3.5	3.7	.2	1.6	3.0	1.3	2.7	3.6	.9
23	3	2.2	1.9	.3	1.4	1.5	.1	-	-	0	1.1	1.2	.1	2.4	3.7	1.3	1.0	1.3	.3
24	3	1.1	1.1	0	1.4	1.5	.1	0	0	0	1.4	1.5	.1	2.4	2.4	0	.8	1.4	.6
25	6	6.7	7.9	1.2	6.2	7.0	.8	7.5	9.2	1.7	7.7	7.4	-.3	7.0	9.8	2.8	6.8	8.0	1.2
26	8	6.7	7.4	.7	4.7	5.4	.7	5.0	6.2	1.2	4.1	3.9	.2	7.2	7.5	.3	5.3	5.6	.6
27	3	4.2	4.0	-.2	7.9	4.7	-3.2	4.4	7.7	2.1	3.9	4.0	.1	5.8	5.3	-.5			
28	3	3.7	3.3	-.4	3.8	3.8	0	3.2	2.7	-.5	3.9	4.1	.2	3.5	3.7	.2	3.5	3.4	-.1
29	4	4.2	5.3	1.1	4.2	6.6	2.4	6.0	5.5	-.5	3.4	3.6	.2	4.1	5.3	1.2	4.2	5.3	1.1
30	1	Tested in May, 1977																	
31	1	Tested in May																	
32	1	Tested in May																	
33	1	Tested in May																	
34	1	Transferred out of District in November 6.4			5.8			6.0			3.9			4.8			5.1		
35	2	Transferred out of district in December.																	
36	1	Transferred out of district in October.																	
37	1	Evaluated in May: 2.6			3.5			3.8			3.5			1.4			3.0		
Average months served: .5		Average Gain:		.7			.4			.9			.3			.9			.6

Table 5

Student #	Months of Service	IRI			PHONICS			BASIC RECOG.			VOCABULARY			ROSEBURG		
		Pre	Post	Gain	Pre	Post	Gain	Pre	Post	Gain	Pre	Post	Gain	Pre	Post	Gain
1	6	3.0	4.0	1.0												
2	7	1.0	3.9	2.9	96	100	4				0	220	220			
3	7	2.4	3.7	1.3							197	220	23			
4	8	1.0	1.3	.3	37	80	43				99	131	32			
5	5	2.2	3.0	.8	25	102	77				172 2.0	218 3.0	46 1.0			
6	8	1.0	1.3	.3	0	72	72	68	135	67				75	94	19
7	8	3.5	6.0	2.5	44	50	6									
8	7	3.0	3.4	.4												
9	8				24	49	25	95	120	25	0	25	25			
10	8				0	54	54	72	132	60				70	74	4
11	8	1.0	1.2	.2				57	115	58	0	60	60	60	85	25
12	6	6.0	6.0	.0							6.0	6.0	0			
13	7	2.0	3.0	1.0							2.0	3.0	1.0			
14	8	1.0	1.2	.2	48	79	31									
15	8							3	12	9				0	31	31
16	8							36	127	91				41	45	4
17	4	1.3	1.6	.3	68	64	1				1.3	1.6	.3			
18	5	2.0	4.0	2.0	103	102	-1				1.6	4.0	2.4			
19	5	1.4	2.0	.6	93	94	[illegible]				196	208	12			
20	6	4.0	5.0	1.0												
21	2	2.5	3.1	.6	82	94	12				2.1	3.1	1.0			
22	4	3.2	4.2	1.0												
23	3	1.3	1.3	0	25	18	-7	84-	93	9	1.3	1.3	.0			
24	3	1.3	2.2	.9	35	65	30	44	131	87	16	30	14			
25	6	6.5	7.5	1.0							6.0	7.0	1.0			
26	8	6.0	6.+	1.0							6.0	7.0	1.0			
27	3	4.1	4.1	0							6.0	6.0	0			
28	3	3.2	3.5	.3							3.0	4.0	1.0			
29	4	3.0	6.0	3.0												
30	1	Tested in May, 1977					37									
31	1	Tested in May						31						73		
32	1	Tested in May														
33	1	Tested in May														
34	1	6.0	Transferred out of District in November.								6.0					
35	2	5.0	Transferred out of District in December								6.0					
36	1	Transferred out of District in October														
37	1	3.1	Evaluated in May								4.0					
Average Gain:				.9			25 Skills		12	50 Skills			48 wds. .9			16

month gain in children's general knowledge of information. Additional gains were measured in reading recognition skills (.4 months) and spelling (.3 months). Average growth for the children in all areas of reading, spelling, arithmetic and general information was .6 months. Tables 4 and 5 also show the average length of services provided these children to be 5 months.

For the 1976-77 Title VI-B Project, an additional component was included but was not defined as an objective with evaluative data. That component was a parent/home program. Specifically, the Child Evaluation staff provided services for all parents of learning disabled children who received services in the Center during the 1975-76 and 1976-77 school years. The months of September and October were set aside to develop a plan for serving parents. This plan consisted of three major areas:

1. Volunteer Aide Training Program. For those who wished to volunteer time in the classroom, a workshop training session was conducted in a number of individual buildings in which the volunteer parents participated. Scheduling and room assignment was also maintained at the building level.
2. Game Construction and Use. For parents who preferred to work at home, packets of materials and instructions for construction and use of learning games were available. Throughout the year, 46 packets were developed for home use.
3. Parent Lending Library. Parents had an opportunity to borrow professional books and children's books and games from the Learning Library Resource Center (LLRS) for home use.

In addition, three meetings were provided for parents which included:

a. implementation of individual packets (two meetings); and

b. Dr. Thomas Rowland, Oregon College of Education, addressed the parents on the topic of "Who is a Learning Disabled Child?"

Third Party Evaluator's Comments:

Historically, centralized educational diagnostic and evaluation services have assisted educators in identifying suggested causal factors of various classroom learning problems. Frequently, however, these centers have provided less than adequate interpretative and suggestive ideas as to how the classroom teacher should proceed in designing educational programs and materials for such children. Consequently, teachers have often found the information they receive about a child following diagnostic and evaluative workups to be of minimal applied use.

The Diagnostic-Prescriptive Center attempted to circumvent many of the historical problems by housing those services within the school district (Albany Elementary School District #5) in which the children to be assisted lived. Thus, the referrals were through an established hierarchy of personnel, all working with the same school system. Following the diagnostic process, the same hierarchy existed for communicating the results and subsequent suggestions for educational intervention. However, what was truly unique and advantageous with the Albany program was that building learning disability specialists were available to assist classroom teachers in applying recommendations to daily instructional strategies. With the specialists available at the building level, interpretations of diagnostic results and suggestions could be paired with appropriate curricular materials and strategies as recommended by the Center staff. Further, at least biweekly follow-up by building specialists and monthly follow-ups by Center personnel provided an added strength to the application of the diagnostic-prescriptive model.

In reference to the funded objectives of the project, Objectives #1, 2 and 4 were all met or greatly exceeded based upon the established evaluative criteria. Objective 3 indicated that weekly meetings between the LD specialist and the classroom teacher would occur. Once the program became operational, it was determined that such regularly scheduled reviews by the specialist were not always necessary. Consequently, the original weekly meetings were extended to bi-weekly meetings with more frequent conferences arranged based upon the difficulty of implementing and conducting an individual child's program as suggested by either the LD specialist or the Center staff. Such modification of program objectives are viewed by the evaluator as appropriate adjustments within a program's functioning; not as failure to reach the originally stated objective. In summary, the Diagnostic-Prescriptive Center can be viewed as but one of many progressive programs that exist in the Albany Public Schools.

Title of Project: Parent Education Project (PEP)

Location of Project: Albany Elementary School District #5

Population Served: Identified Kindergarten and First Grade Learning Disabled Pupils

Funding Allocated: $12,000

Project Beginning Date: September 1, 1976

Project Ending Date: June 5, 1977

Background and Rationale:

Educators are looking to the preschool and early primary years as the most critical time to break the cycle of predictable academic failure. Benjamin S. Bloom (1964) suggests that over 50% of a child's intellectual capacity and 33% of his academic skills are developed between birth and age six. Therefore, it is believed that early training and education will influence the remaining academic and intellectual skills to be developed beyond the preschool years. The Parent Education Project (PEP) was, thus, designed to provide educational services for young children with identified skill needs.

Results from much of the early intervention and compensatory education programs for children with identified skill deficits indicate that initial gains tend to "wash-out" after intensive intervention is discontinued if it has not been accompanied by changes in the child's total home environment. Early programs designed to effect change in the mother's teaching style, the materials found in the home, the parent system for rewarding the child, and the parental expectations have all shown encouraging results with student gains being maintained for longer periods of time. Therefore, the PED was specifically designed to provide the parents of identified young children with the necessary skills, methods and materials to enable them to carry out educational programs designed to remediate the individual skills deficits of their own children.

Methodology:

The PEP staff consisted of one teacher and one aide who also was a certified teacher.

Learning disabled students of first grade age and presently served by the Albany Pre-Primary Program could participate in a prescriptive home program. Disabled students from the kindergarten classes who were not receiving special educational services could also participate in the program. Thus, the PEP program consisted of both the Pre-Primary and Kindergarten Parent Programs.

Parents attended monthly meetings conducted by the PEP staff, who presented specific games and activities which were to be carried out by the parents in the home. A skill packet of activities was designed specifically to meet the needs of individual children. Parents were to carry out these activities with their child and return results from those activities to the PEP staff. The child was posttested, one month after the meeting in each skill covered at the previous month's meeting. Parents were shown their child's skill gains at the following monthly meeting, at which time new skill packets were presented.

One afternoon and one evening meeting were held each month. The parents of Pre-Primary children needed to attend only one meeting per month. A separate afternoon meeting was held for the participating parents of Kindergarten children. At the monthly parent meetings, activities for each skill in that month's packet were described and/or modeled. During the year at the Pre-Primary PEP meetings, 93 skills were covered from the curriculum. At the Kindergarten PEP meeting, 34 readiness skills (also from the Pre-Primary curriculum) were discussed. The skill areas covered were Personal-Social, Language, Reading, Math, Auditory, Visual, Fine Motor, Writing, and Physical Education. Each child was pretested in his skill area and only those skills that the child needed were included in his skill packet. In addition, films and audio-visual presentations covering various aspects of learning disabilities and behavior management were important topics at the monthly meetings. If a parent was unable to attend a meeting, he or she could call the PEP staff and the child's individualized skill packet was mailed to the child's home.

Objectives:

1. All Pre-Primary students will receive appropriate educational prescription to be carried out by their parents in the home environment.

Evaluation: Pre- posttest data will be recorded on class charts. Pre- posttest data will be recorded on individual scope and overview for each child. A record of dates and method of contact of parents will be maintained. A record of parent attendance at workshops will be maintained. A record of parents' return of completed home programs will be maintained.

Results: Attendance. Table 1 presents the average monthly meeting attendance of parents of children included in the Pre-Primary PEP program. Approximately 35% of the parents attended monthly meetings. The percentage of attendance ranged from a high of 50% in October, the initial introductory meeting, to 17% in April when Math and Physical Education skills were covered. Approximately 20% of the parents did not attend monthly PEP meetings. Table 2 presents the average monthly meeting attendance of parents included in the Kindergarten PEP program. Approximately

29% of the parents attended monthly meetings, ranging from a high of 36% in March to a low of 21% in April. Approximately 47% of the parents did not attend monthly PEP meetings.

Table 1

Percentage of Parent Attendance - Pre-Primary Parent Program

1976-77

Oct.	Nov.	Dec.	Jan.	Feb.	March	April	May
50%	35%	35%	42%	39%	28%	17%	35%

Table 2

Percentage of Parent Attendance - Kindergarten Parent Program

1976-77

Feb.	March	April	May
26%	36%	21%	31%

Program data returned. Although April was the month with the smallest percentage of parents attending the monthly meetings, 80% of those who attended returned the home administered program data sheet. The smallest percentage (25%) of returned data occurred in March when Auditory skills were discussed. Table 3 presents the percentage of Pre-Primary PEP program returned data sheets by the number of meetings attended. The data in Table 3 duly indicate that parents who chose to be involved in the PEP were very involved.

The parents of children in the Kindergarten PEP program were not asked to return data sheets.

Table 3

Program Data Returned by Pre-Primary Parents - 1976-77

	Number of Meetings Attended			
	0	1-2	3-6	7-8
Percentage of Parents Who Returned Data Sheet	0%	0%	42%	83%

Skill mastery. Table 4 presents the percent of newly acquired skills by curricular area for Pre-Primary pupils, according to the number of times a parent attended monthly meetings. Those data indicate that parents who came to 7-8 meetings had children who, as a group, scored lowest across all pretest administrations, yet made the greatest skill gains during the year. Children whose parents attended no PEP meetings demonstrated mastery of 25% of the curricular skills at the time of pretesting, 74% at posttesting; thus acquiring an additional 49% of the total skills in the PEP Pre-Primary curriculum. Children of parents who attended 1-2 meetings and 3-6 meetings acquired an additional 53% and 50% of the total curricular skills, respectively. Children whose parents attended 7-8 meetings demonstrated skill mastery at pretesting on only 21% of the skills, on 81% of the skills at posttesting, or a total skill increase of 60%.

Table 5 presents the percent of newly acquired skills by curricular area for Kindergarten pupils, according to the number of monthly meetings attended by parents. Children of parents who attended no monthly meetings and those whose parents attended 3-4 meetings (the total number of meetings was 4) pretested at approximately the same percentage of skills mastered and 10% higher than children whose parents attended 1-2 meetings.

Table 4

Pretest, Posttest and Gain Scores of Children Whose Parents Attended a Certain Number of Monthly PEP Meetings
Pre-Primary Program

Curricular Area	Meetings Attended by Parents											
	0			1-2			3-6			7-8		
	Pre	Post	Gain	Pre	Post	Gain	Pre	Post	Gain	Pre	Post	Gain
Personal-Social	20	62	42	33	79	46	31	75	44	33	90	57
Language	27	77	50	30	88	58	24	78	54	21	86	65
Reading	13	61	48	18	66	48	12	70	58	11	77	66
Math	4	57	53	8	76	68	6	60	54	9	68	59
Auditory	23	72	49	32	80	48	22	73	51	13	73	60
Visual	12	84	72	38	98	60	23	95	72	10	90	80
Fine Motor	47	90	43	37	86	49	46	84	38	38	89	51
Writing	18	70	52	20	81	61	18	64	46	16	67	51
Physical Education	61	94	33	51	92	41	51	84	33	42	92	50
MEAN	25	74	49	30	83	53	26	76	50	21	81	60

Table 5

Pretest, Posttest and Gain Scores of Children Whose Parents Attended A Certain Number of Monthly PEP Meetings Kindergarten Program

Curricular Gain	Meetings Attended by Parents								
	0			1-2			3-4		
	Pre	Post	Gain	Pre	Post	Gain	Pre	Post	Gain
Personal-Social	37	62	25	30	64	34	21	83	62
Language	41	81	40	38	71	33	69	100	31
Reading	50	88	38	50	83	33	56	88	32
Math	68	72	4	61	72	11	92	92	0
Auditory	62	87	25	61	89	28	83	83	0
Visual	50	75	25	42	75	33	25	88	63
Fine Motor	56	75	19	33	59	26	50	88	38
Writing	63	84	21	46	71	25	50	81	31
Physical Education	91	91	0	71	75	4	88	88	0
MEAN	58	79	21	48	73	25	59	88	29

At posttesting children whose parents had attended 0, 1-2 and 3-4 monthly meetings demonstrated skill mastery of an additional 21%, 25% and 29% of the total skills, respectively. These results suggest that parental attendance of monthly meetings was associated with increased skill gains by their children. Perhaps even greater gains by children whose parents attend meetings would have been realized had a certain ceiling effect been encountered in the Language, Math, Auditory and Physical Education areas of children whose parents attended 3-4 meetings.

2. Ninety percent of the students served by the Parent Education Program (PEP) will gain as an average at least one skill for each month the program is carried out.

Evaluation: The pre- posttest skill gain data will be recorded and reported.

Results: A total of 26 children were enrolled in the Pre-Primary program and parents of 18 of those children attended one or more of the monthly PEP program meetings. Of those 18 children, 17 (94%) gained at least one new skill for each month their parents attended a PEP meeting (see Table 6). The single child who did not reach the established criterion of one new skill for each month of parent involvement did acquire .8 new skills for each such month. In addition, 6 of the 18 children gained two or more skills per month of parent involvement, with three skills per month being the highest.

Table 7 presents similar skill gains by month for Kindergarten children as was presented in Table 6 for Pre-Primary children. Of the 19 children enrolled in the Kindergarten program, parents of 10 of those children attended one or more monthly PEP meeting. As evidenced in Table 7,

Table 6

Number of Skills Gained During Months in Which Parents Were Involved in the PEP Program Pre-Primary

		Skills Gained by Curricular Area									Skills Gained by Months of Parental Involvement	
Child	Months Parent Involved	Personal-Social[1]	Auditory	Physical Ed.[2]	Fine Motor	Writing	Visual[1]	Reading	Math[2]	Language	Total	Mean
1	6		0	0	2	2		3	2	0	9	1.5
2	2				1			1			2	1.0
3	6	0		1	3	1	1	2	2	2	12	2.0
4	4		2			2		0		0	4	1.0
5	5		2		1	0		1		0	4	.8
6	7	6	0	1	4	0	1	1	0	0	13	1.9
7	7	1	0	1	1	1	1	0	7	2	14	2.0
8	6	3	0	1		1	1	0	5	3	14	2.3
9	1	3					0				3	3.0
10	3	4				3	0			1	8	2.7
11	3	3	0				0	0			3	1.0
12	1				1						1	1.0
13	3	0			4	1	1				6	2.0
14	1					1					1	1.0
15	6	3	0		3	2	0	0		1	9	1.5
16	3				4			0		0	4	1.3
17	1	1					0				1	1.0
18	1					1					1	1.0

Note. [1] Personal-Social and Visual skills were covered during same month.

[2] Physical Education and Math skills were covered during same month.

Table 7

Number of Skills Gained During Months in Which Parents Were Involved in the PEP Program Kindergarten

		Skills Gained by Curricular Area				Skills Gained by Months of Parental Involvement	
Child	Months Parent Involved	Personal-Social Fine Motor Language	Visual Reading Language	Auditory Writing Language	Math Physical Ed. Language	Total	Mean
1	1	1				1	1.0
2	1		1			1	1.0
3	2		2		0	2	1.0
4	3	5	3		0	8	2.7
5	1		2			2	2.0
6	3	6		2	0	8	2.7
7	2		3	0		3	1.5
8	4	8	3	0	0	11	2.8
9	4	3	2	0	*	5	1.7
10	1				*		

* Children Nos. 9 and 10 had 100% of skills at pretest.

all 10 children averaged one new skill during each month their parents were involved in the PEP meetings. Further, 4 of those 10 children gained two or more new skills for each such month of parental involvement. Additional skill gains may well have been acquired but simply not measured due to children 9 and 10 having scored 100% on the Math-Physical Education and Language pretests.

Third Party Evaluator's Comments:

The Parent Education Project (PEP) experienced the perpetual difficulty in gaining program involvement of all parents of children identified as having an academic or learning problem. Of the 26 children included in the Pre-Primary program for children with identified skill deficits, 18 of the parents attended one or more meeting, with approximately 50% of those parents attending half or more of the meetings. Similarly, at the Kindergarten level, 10 of 19 children's parents attended one or more meeting, with 21% of those parents attending half or more of the meetings. Without demands placed on parental cooperation and attendance of scheduled meetings, the degree to which the PEP program was able to obtain and monitor parental involvement must be considered successful.

It is of interest to note that greater cooperation and attendance was observed by parents of Pre-Primary children than of Kindergarten children. Typically, once a child enters or is about to enter regular school age programs and an academic learning problem is detected, parents are more eager to devote energies to assisting their child than when he is younger and the problem may be less evident or at least less urgent in the parents' views.

With respect to the second objective, the PEP program must also be considered to have achieved its intent. All but one Pre-Primary pupil reached the established criterion for new skill acquisition for months in which their parents attended monthly PEP meetings; that child narrowly failed to reach that criterion. In most cases children gained more skills than were projected.

It is difficult to determine the degree of skills learned by the PEP program children without consideration of the degree of difficulty and the distance between skills used to measure child gains. The instrument used by the PEP program is the Scope and Overview, Pre-Primary Curriculum constructed by Albany Elementary School District #5 staff for providing both an instructional and evaluation tool. The Scope and Overview consists of 104 distinct skills grouped across 10 curricular areas. Each skill within an area is exclusive of other skills but frequently requires similar abilities in different or more complicated tasks. Individual items are not dissimilar from items on other primary skills checklists, but have been pooled to serve the needs of young children with learning skills deficits. Thus, a gain of one or more skills may represent a considerable accomplishment for a child already experiencing learning delays.

Title of Project: Pre-primary Learning Disability Prevention/Intervention

Location of Project: Fairmount District #43
North Albany District #34

Population Served: 14 Learning Disabled Pupils

Funding Allocated: $17,000

Project Beginning Date: August 25, 1976

Project Ending Date: June 25, 1977

Background and Rationale:

The Special Education records at Fairmount and North Albany Grade Schools and Linn Benton County IED indicated that each year approximately 26% of their primary grade pupils had specific learning disabilities (significant lags/disabilities in language, auditory, visual, motor, speech and/or cognitive functions) requiring special education services. From this, it was anticipated that 26% of the future primary group, now preschoolers, ages 4-6, would also exhibit disabilities requiring special education.

Fifty-four district pre-primary age children receiving no special or other educational services were identified. These were children who would be entering either Fairmount or North Albany Grade Schools. Of these, an estimated 14 (26%) would possibly benefit from a special education program. A routine procedure needed to be established to identify handicapping conditions and to determine specific educational/developmental needs within this group. Specific prescriptive instructional programs needed to be developed and made available to these children. Parents and community personnel needed to be organized and involved in the children's early educational and developmental processes.

The intent of this program was to ameliorate the significant educational gaps of these young children by developing and implementing instructional and reinforcement strategies for changing the learning and social behaviors of the children who exhibited potential or confirmed learning disabilities. By capitalizing on the increased positive effect of instruction at a younger age, these children would hopefully experience greater success in their educational experience.

Methodology:

To serve these 14 pupils who exhibited one or more learning disabilities, a full time specialist developed, implemented and supervised the individual and group prescriptive instruction provided each child by 19 university student aides. During the year, one graduate and two undergraduate students in Speech Pathology were responsible for implementing prescribed individual and group speech, language, auditory and cognitive instructional programs. Fifteen undergraduates majoring in Physical Therapy and Adaptive P.E. were trained to appropriately implement prescribed individual and group gross and fine motor and visual-perceptual instructional programs. Seven of these students were trained in task analysis and assisted with instructional program development. A graduate counseling student conducted initial personal-social observations to determine social skill needs and then design appropriate instructional programs. Five of the 19 volunteers participated for two terms, providing a per term student-teacher ratio of 2:1. The majority of volunteer assistance was solicited from students interested in motor and language skill development since the most prevalent and significant discrepancies were indicated in these areas.

Each child received individual instruction in his deficient area(s) followed immediately by small group (3-5) instruction for maintenance, transfer and generalization of acquired skill. Group and individual instructional periods were conducted simultaneously throughout the day to maximize effective use of aides and instructional organization. Bi-monthly video-taping of individual and group sessions were used to further assess student progress, effectiveness of instructional techniques and program needs.

Objectives:

1. To diagnose and evaluate selected children.

Evaluation: The number of children diagnosed and evaluated and the results will be recorded and reported.

Results: Forty-nine children were screened in September 1976 and again in June 1977 using the Denver Developmental Screening Test (DDST), a composite inventory of speech and auditory skills, and the Vineland Social Maturity Scale. Ellen Johnson and Nancy Dunn of the Mid-Valley Speech and Hearing Clinic provided impedence, reflex and pure tone audiometric assessments. Dr. Rod Bourdage trained staff to assess visual acuity, near-point convergence, depth perception, general eye health and personally assessed children with questionable vision screening results. Relevant medical and family history information was obtained through parent interview by an ELP specialist. Results of this screening indicated that twelve children should be referred to medical specialists for further diagnosis and possible treatment.

Of the forty-nine children screened in September 26 (53%) indicated a significant negative discrepancy of 12 or more months in two or more areas. These children would be enrolled in two different elementary schools so the numbers would closely approximate the predicted estimate of 26% of children needing special assistance in each school.

2. To increase the child's skill in one or more of the following areas: language, motor, and speech.

Evaluation: Baseline data will be collected. A prescriptive program will be designed and implemented, and interim data will be collected on selected children in selected programs. These data will be recorded and reported. Selected standardized tests will be administered on a pre-posttest basis and the results will be recorded and reported for each child.

Results: The following tests were used in the following areas: Language: Boehm Test of Basic Concepts; Raven Colured Progressive Matrices (Book Form); Peabody Picture Vocabulary Test; Spontaneous Language Sample; Carrow Elicited Language Inventory. Speech: Templin-Darley and McDonald. Gross Motor: Carolina Developmental Profile; Valett Psychoeducational Inventory of Basic Learning Abilities. Fine Motor: Beery Developmental Test of Visual-Motor Integration; Carolina Developmental Profile. Results of the interim and posttesting indicate that all children showed progress in the areas assessed. In addition, by June, at least 80% of all programs prescribed for each child were successfully completed.

Results of the pretesting in September 1976 indicated that the children as a group were deficient in all areas assessed with the areas of language and gross motor being the most deficient. By February, 1977 performance in all areas was within an acceptable range and by June, 1977 further improvement was shown in all areas with the greatest progress being shown in the fine motor area.

Third Party Evaluator's Comments:

This project has successfully demonstrated the need to identify children with potential learning disabilities at an early age and then provide appropriate educational intervention strategies to overcome the identified disabilities.

The screening process used in this project was quite thorough and the utilization of trained volunteers to conduct the programs was excellent. The fact that the educational programs that were initiated were so closely a part of the child's identified deficiency, helped insure the positive results obtained.

Results clearly indicated that progress did occur. As part of this project it would be interesting to follow these pupils through their elementary years to determine if they have successfully overcome their deficits over a period of time.

Title of Project: Hope for the Learning Disabled Child

Location of Project: North Marion Elementary School
Route 3, Box 3000
Aurora, Oregon

Population Served: 40 evaluated; 30 direct services (800 school population)

Funding Allocated: $13,924

Project Beginning Date: July 1, 1976

Project Ending Date: June 30, 1977

Background and Rationale:

The Hope for the Learning Disabled Child project was undertaken to meet the needs of learning disabled students in providing alternative ways of learning. This project grew out of the expressed concern of the elementary counselor, teaching staff, and parents, who emphasized that such services were not then available for an estimated 5% of the school population who were "learning disabled." In addition to the learning disabled child, the project would provide services for children with identified behavioral problems.

Methodology:

Referral procedures remained the same as last year; that is by (1) teacher referral; (2) parent and/or other personnel referral; and (3) referral of all children who had been tested and identified by other outside agencies.

Ten children who had been identified and worked with last year were continued in this year's program. Two children who had worked with the Title I Reading Teacher last year were picked up in the learning disabilities program. Eighteen additional children were evaluated and accepted into the learning disabilities resource room, making a total of 30 who received direct services this year. This represents an increase of 55% over last year's total. Two students were present for less than three months.

The daily schedule in the resource room also followed last year's format. Sessions for individuals or small groups met for ½ hour at least four days a week. Help was requested and given to more teachers this year on materials and behavioral programs. These programs were such that children could work on them in their classrooms. Orton-Gillingham was the approach basically used for language skills remediation, but DISTAR and the Auditory Discrimination in Depth (ADD) Program were included this year. Additionally, training in basic math skills was also provided.

Objectives:

1. To increase the selected basic skills (math, reading, handwriting, spelling) for those children designated as having extreme learning problems.

Evaluation: A criterion-referenced inventory was designed and implemented for each child.

Results: Evaluation of student progress was by means of pre- and posttesting using the same teacher-made and/or standardized tests. Lindamood Auditory Conceptualization (LAC) Test scores on ten students before beginning the ADD program averaged -16.7. After a minimum of three months in the program, LAC scores averaged -2, showing an average growth of 14 points.

The Key Math Diagnostic Arithmetic Test given before and after remediation to four students showed an average growth of nine points.

On the Iota Isolated Words List, given to 14 student before and after remediation, an average gain of 1.1 years was made. Less gain was shown in spelling--13 students showed an average of .57 years in oral spelling, and .3 years gain in written spelling.

2. To reduce the number of deviant behaviors of those children referred by the classroom teachers.

Evaluation: Baseline data were collected on those children in the regular classroom. Intervention strategies for each child were designed and implemented. Interim data were collected on each child. Probes were conducted by the extreme learning problems teacher to measure the maintenance of the behavior specified. The frequency of those probes was designated by the teacher.

Results: Six children were referred by teachers because of behavioral difficulty in the classroom. Baseline data were obtained on all of them during classroom observation. Conferences with the classroom teacher were held in each case and suggestions discussed as to how the problem might be dealt with. In one case, the psychiatrist working with the child was included in a conference with all teachers working with this child. Three classroom programs were set up--two programs for task completion, and one to help a child wear his glasses at the appropriate times. One task completion program was terminated when medication seemed to be helping the child to organize his time. Both of the other programs were carried to completion. Probes assured maintenance of the first, and the end of school made a probe of the second impractical.

Third Party Evaluator's Comments:

This is the second year of operation for this program in the North Marion area. This evaluator was able to monitor the progress of this project across the two years and found much improvement in regard to methodology employed and more specifically, in regard to the teachers' ability to track individual student academic behaviors and adapt programming as a result of student performance. The staff, teachers and administrators, have done an exemplary job of setting up a program which not only provides extra help for learning disabled children but goes the next step in providing help to the classroom teacher so that the teacher can learn to better cope with learning disabled children in their classroom. They are congratulated and it is hoped that the district can continue the program without the benefit of Title VI-B funds.

Title of Project: Skills Center for Socially and Emotionally Handicapped

Location of Project: Baker School District 5J

Population Served: Maximum of 12 Socially and Emotionally Handicapped Students

Funding Allocated: $13,300

Project Beginning Date: September 7, 1976

Project Ending Date: June 10, 1977

Background and Rationale:

In the fall of 1975, 10 secondary students (a combination of middle and high school students) from Baker School District 5J were identified as socially and/or emotionally handicapped and unable to make satisfactory progress in the regular school program. Seven of the ten students were enrolled in school in the regular class program. They were functioning poorly and attending sporadically. Prognosis for their remaining in school much longer was poor unless an alternative method of education was provided to more adequately meet their needs. Three of the ten students were unable to attend school and were being tutored on a one to one basis five days a week, one hour per day.

Methodology:

The main purpose of the program was to provide a Skills Center for secondary students identified as socially and emotionally maladjusted who were to function in a regular class program for school year 1976-77. These students were selected according to the criteria included in the state definition of emotionally handicapped. Recommendations for placement were made after individual study of intelligence, educability, physical status, environmental background, and family background.

Maximum number of students to be included was twelve (no more than eight to be in the Skills Center at one time). Emphasis was placed on establishing an individualized program for behavioral change in skills needed to interact appropriately with peers, parents, and teachers both in the Skills Center and in regular class integration. Group and individual therapy sessions were scheduled with a staff psychologist. Effort was made to the maximum extent appropriate, to enable the students to function in an educational program in the regular school program as fully and as soon as possible.

Ninety percent of the identified students were significantly behind in study and academic skills. Individualized academic instruction was provided to attempt to meet this need.

Each student enrolled received instruction on criteria selected from areas of the Toward Competency Guide and/or Baker's Minimum Graduation Competencies. The teacher selected criteria realistic for each individual to attain. The criteria selected were used as pretest criteria and were rechecked for posttest data. The teacher recorded in the guide dates criteria were checked and whether or not they had been reached.

Appropriate and/or inappropriate behaviors for Skill Center students were identified, baseline data was collected, and a prescriptive program was designed and implemented with a criterion level of acceptable performance specified.

A log was maintained for recording the length of time the emotionally handicapped child spent in the Skills Center and the length of time spent in the regular classroom.

Objectives:

1. To increase the basic skills (math, reading, and spelling) of selected students (maximum 12).

Evaluation: The Toward Competency Guide and/or Baker's Minimum Graduation Standards will be used to record and report the progress of each student.

Results: Table 1 shows that 100% of the socially and emotionally handicapped students enrolled in the Skills Center demonstrated gains in the selected behaviors contained in the Toward Competency Guide. The basic skills area included reading, math, and spelling. Gains were reported on the number of items from the Toward Competency Guide attained by the student from pretest to posttest. Both the number of criteria attained at posttest time and those selected at pretest time are reported.

Table 2 shows that 92% of the students enrolled in the Skills Center demonstrated gains toward completion of Baker's Minimum Graduation Competencies. Gains were reported as the number of competencies attained from pretest to posttest. Both the number of competencies attained by posttest and those originally selected at the pretest are reported.

2. To increase or decrease appropriate or inappropriate behavior for selected students in the Skills Center.

Evaluation: The behavior will be pinpointed, baseline data will be collected, a prescriptive program will be designed and implemented with a criterion level of acceptable performance specified. Data for the program will be recorded and reported.

Results: Table 3 shows the percent of time that each student enrolled in the Skills Center spent on task during Skills Center time.

Table I

Toward Competency
Pre – Posttest for Socially and Emotionally Handicapped Students
N = 12

Student #	Age	No. Months in Program	BASIC SKILLS		PERSONAL & SOCIAL AWARENESS		LIVING IN THE ENVIRONMENT		CAREER EDUCATION		HUMAN ECOLOGY		LEISURE TIME ACTIVITIES	
			Possible Items	*Criteria Level Attained	Possible Items	*Criteria Level Attained	Possible Items	*Criteria Level Attained	Possible Items	*Criteria Level Attained	Possible Items	*Criteria Level Attained	Possible Items	*Criteria Level Attained
1	15	9	351	11/12	125	10/18	249	0	120	7/17	140	0	112	11/12
2	15	8	351	10/12	125	2/2	249	0	120	8/17	140	0	112	11/11
3	15	8	351	6/12	125	2/2	249	0	120	5/17	140	0	112	10/11
4	16	8	351	11/11	125	6/6	249	0	120	11/17	140	0	112	11/11
5	15	1	351	10/11	125	2/2	249	0	120	11/17	140	0	112	9/11
6	16	4	351	4/11	125	2/18	249	0	120	3/17	140	0	112	2/11
7	15	8	351	12/12	125	2/4	249	0	120	10/17	140	0	112	10/11
8	16	5	351	12/12	125	1/18	249	0	120	16/20	140	0	112	12/11
9	16	4	351	0/11	125	0/1	249	0	120	17/20	140	0	112	1/12
10	16	5	351	11/11	125	18/18	249	0	120	15/17	140	0	112	11/11
11	16	1	351	1/12	125	0/6	249	0	120	1/17	140	0	112	0/11
12	13	7	351	6/12	125	2/2	249	0	120	5/6	140	0	112	4/11

*Number Criteria Attained By Posttest/Number Criteria Selected At Pretest

Table 2

Minimum Graduation Competencies
Pre – Posttest for Socially and Emotionally Handicapped Students
N = 12

Student #	Age	No. Months In Program	PERSONAL DEVELOPMENT								SOCIAL RESPONSIBILITY						CAREER DEVELOPMENT				
			Reading *13	Listening *3	Analyzing *4	Speaking *8	Writing *4	Computing *33	Science *30	P.E./Health *24	Citizen/ Community *9	Citizen/ State *10	Citizen/ Nation *4	Citizen Environment *21	Citizen/ State Highways *19	Consumer/ Goods & Services *21	Career Habits *4	Attitude *4	Relationships *1	Decisions *2	Competence *3
1	15	9	5/2	2/1	3/1	5/1	3/1	33/4	30/5	10/3	1/1	1/1	0	8/2	4/3	0	0	2/2	0	2/2	3/1
2	15	8	3/1	2/1	3/1	4/1	0	0	1/1	3/1	3/1	0	0	0	10/4	0	0	0	0	0	0
3	15	8	3/1	2/1	4/1	0	0	0	1/1	4/2	3/2	0	0	0	7/4	0	0	0	0	0	0
4	16	8	3/1	2/1	3/1	5/1	2/1	3/1	1/1	3/2	3/2	0	0	0	11/4	0	0	0	0	0	0
5	15	1	3/1	2/1	3/1	0	2/1	2/1	1/1	4/2	3/2	0	0	0	11/4	0	0	0	0	0	0
6	16	4	4/1	2/1	0	3/1	0	3/1	0	4/1	0	0	0	0	0	0	0	0	0	0	0
7	15	8	1/1	2/1	2/1	5/1	2/1	3/1	15/5	16/4	1/1	9/3	3/2	2/2	12/4	1/1	0	0	0	0	0
8	16	5	5/2	1/1	2/2	0	3/1	28/4	10/3	0	3/1	4/1	4/2	0	0	3/2	0	2/2	0	0	2/1
9	16	4	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---
10	16	5	4/1	2/1	0	3/1	0	0	0	3/1	3/2	0	0	0	0	0	0	0	0	0	0
11	16	1	0	1/1	0	1/1	---	---	---	---	---	---	---	---	---	---	---	1/1			1/1
12	13	7	7/2	2/1	3/1	5/1	3/1	32/5	30/5	8/4	1/1	1/1	0	8/2	4/3	0	0	2/1	0	2/1	3/1

*No. in area denotes possible Competencies that could be completed.

NOTE: Numbers listed for each student denote the following: No. Competencies attained by posttest/No. Competencies selected at pretest

Table 3

Socially and Emotionally Handicapped Students
% of Time Spent on Task
in the Skills Center
N = 12

Student #	Age	No. Months in Program	% TIME ON TASK	
			Pretest	Posttest
1	15	9	25%	62%
2	15	8	78%	93%
3	15	8	8%	70%
4	16	8	15%	42%
5	15	1	55%	14%
6	16	4	90%	51.6%
7	15	8	28%	81%
8	16	5	25%	80%
9	16	4	.001%	1%
10	16	5	41%	99%
11	16	1	40%	42%
12	13	7	54%	80%

Eighty-three percent of the Ss enrolled demonstrated gains in on-task behavior.

Table 4 shows the number of behaviors pinpointed for treatment of each student and the number of selected behaviors attained by each Ss at criterion level. Ninety-two percent of the Ss enrolled demonstrated gain in improving behaviors selected for treatment.

Group and individual therapy sessions were scheduled with a staff psychologist. A minimum number of group sessions were implemented as the psychologist felt that the group was not ready for group therapy sessions on a frequent, regular basis. Therefore, individual therapy sessions were utilized to a greater extent. The psychologst felt that two of the twelve students enrolled had the potential to attain emotional habilitation to function as non-emotionally handicapped individuals.

Table 4

Socially and Emotionally Handicapped Students
N = 12
Behaviors Selected for Change

			BEHAVIOR	
Student #	Age	No. Months in Program	# Behaviors Selected	# Behaviors Reaching Criterion Level Selected
1	15	9	11	8
2	15	8	7	5
3	15	8	8	5
4	16	8	12	9
5	15	1	7	2
6	16	4	7	2
7	15	8	10	3
8	16	5	4	1
9	16	4	4	0
10	16	5	6	5
11	16	1	7	0
12	13	7	7	4

3. To increase the length of time the emotionally handicapped child will spend in the regular classroom.

Evaluation: A log will be maintained for recording the length of time the emotionally handicapped child spent in the regular classroom. These data will be recorded and reported.

Results: Table 5 shows the percent that each student enrolled in the Skills Center spent in the Skills and in Regular classes from pretest to posttest.

Due to the severity of acting-out behaviors outside of school (at home and in the community) seven of the twelve students (58%) enrolled in the Skills Center were removed from their homes and placed in foster or group homes. Some of the students lived in several foster homes during their Skills Center placement. Four of the students were eventually removed from the community for placement in 24 hour treatment centers. One student had to be removed from school the last nine weeks of school and individually tutored due to student/parent/school relationship.

These events surely had an impact on the results attained and should be considered when evaluating this project.

Third Party Evaluator's Comments:

The third party evalua or would like to thank the project staff for submitting a very comprehensive and complete final report.

It becomes apparent in reviewing the data displayed in Tables 1 to 5 that all objectives have been met or exceeded.

Of particular importance is that as of this writing this classroom will not be funded in the 1977-78 school year. It would be the recommendation of this evaluator that the school district strongly consider continuing the class in forthcoming years. The project staff certainly has demonstrated a need and competency in this area of emotionally handicapped.

Table 5

Socially and Emotionally Handicapped Students
% of Time Spent in
Skills Center and Regular Classes
N = 12

Student #	Age	No. Months in Class	PRETEST		POSTTEST	
			Skills Center	Reg. Classroom	Skills Center	Reg. Classroom Cut to ½ day
1	15	9	100%	0%	83%	17%
2	15	8	67%	33%	67%	33%
3	15	8	67%	33%	67%	33%
4	16	8	67%	33%	50%	50%
5	15	1	67%	33%	67%	33%
6	16	4	83%	17%	33%	0%
7	15	8	67%	33%	17% 3rd 9wks/tutored 4th 9 wks	83% 3rd 9wks/tutored 4th 9 wks
8	16	5	33%	67%	17%	83%
9	16	4	83%	17%	83%	17%
10	16	5	83%	17%	33%	67%
11	16	1	50%	50%	50%	50%
12	13	7	33%	0%	33%	Tutored

Title of Project: Baker IED Speech Therapy for Special Education and Preschoolers

Location of Project: Baker, Oregon

Population Served: 36 Special Education and Preschool Children

Funding Allocated: $12,460

Project Beginning Date: August 30, 1976

Project Ending Date: May 31, 1977

Background and Rationale:

There are approximately 50-60 TMR/EMR students residing in Baker County. The only educational program in this area for these children is the present special education classrooms in Baker. This program did not have speech and language instruction, except for the very limited help provided by the Baker County IED. At the preschool level there were approximately 160 preschoolers enrolled in various agencies in Baker. The combined speech and language impaired of the TMR/EMR and preschool age totals 32 according to a recent survey and poll. Because of the severity of these children's communication disorders, the present weekly and monthly visitation instruction was not sufficient.

The major purposes of this project was to provide intensified supplementary instruction in speech and language designed to assist these children, their regular classroom teachers and parents where applicable. A qualified speech/language specialist was employed with project funds to visit with each child, their teacher and parents on a regular schedule to assist in dealing positively with the problem caused by the child's communication disorder.

The speech/language specialist was employed by the Baker County IED and went to all schools housing target students, which were cooperating with this program project. Information concerning this project was made available through reports to the Baker County IED Board. Information regarding this project was also made available through a third party evaluation team of Teaching Research at Monmouth, Oregon.

The objectives for this project were to extend (1) speech/language therapy time to TMR and EMR public school students with severe communication disorders and (2) to provide a consultant and intensified speech/language therapy program for the preschool children with communication disorders.

All children selected for this project were identified through speech/language diagnostic test batteries.

Methodology:

The speech/language specialist visited each building in the target area seeing a TMR/EMR child at least twice each week providing speech and language remediation instruction. This same specialist visited with each identified preschooler at least once a week providing similar individual speech and language remediation. The regular classroom teacher had the primary responsibility for the care and management of these children in the room. The speech/language specialist helped to make this experience productive and satisfying for the regular teacher and child.

The speech/language specialist advised families of specific services to assist them in dealing effectively with the special needs and problems of children with communication disorders.

The parents received information regarding existing medical, educational and rehabilitation services to assist them with their impaired child.

The speech/language specialist interpreted the educational ramifications of otologic, audiologic, and communication disorder reports to teachers, parents, and school administrators.

Objectives:

1. To extend speech and/or language therapy time to TMR and EMR public school students with severe communication disorders.

Evaluation: Pre- and posttest results of the Photo Articulation Test and the Peabody Picture Vocabulary Test will be recorded and reported.

Results: Those data contained in Table 1 are for 24 EMR and TMR students. The Photo Articulation Test score is displayed in terms of a decrease in the number of errors. For example, Student A reduced the number of errors between the pre- and posttest a total of 8 (13 minus 5). The Peabody Picture Vocabulary Test was administered to 22 students. The gain or difference is noted by subtracting the prestest score from the posttest score.

2. To provide a consistent and intensified speech and/or language therapy program for preschool children with communication disorders.

Evaluation: Pretest and posttest results of the Photo Articulation Test and the Peabody Picture Vocabulary Test will be recorded and reported.

Results: Table 2 contains the data for both the PAT and Peabody Picture Vocabulary Test. The Photo Articulation Test and Peabody Picture Vocabulary Test (PPVT) results are submitted for most of the TMR/EMR and preschool population. There were some in this population group for whom no results were obtained. An explanation for this is simply that the children addressed to this task could not satisfactorily complete the test at all. Therefore, the results for some of the children are incomplete and not contained in this report.

The pretests were administered in late September and the posttests were administered in early June. The actual test sheets have been filed in each individual's record folder.

Table 1

Photo Articulation and Peabody Picture Vocabulary Tests

Pre- and Posttest Scores for EMR and TMR Students
N = 24

	Photo Articulation Test		Peabody Picture Vocabulary	
Student	Pretest	Posttest	Pretest	Posttest
A	13/94	5/94	9-2	8-2
B	7/94	0/94	10-8	10-1
C	22/94	4/94	6-8	7-0
D	19/94	6/94	6-3	7-10
E	36/94	25/94	5-1	7-0
F	46/94	36/94	5-2	6-8
G	15/94	7/94	5-9	6-8
H	13/94	0/94	11-4	10-2
I	10/94	5/94	6-6	7-5
J	27/94	11/94	7-3	8-6
K	28/94	9/94	5-5	4-6
L	2/94	7/94	2-1	1-11
M (posttest (without hearing aid)	3/94	14/94	2-11	2-6
N	16/94	8/94	7-1	8-11
O	17/94	3/94		
P	13/94	2/94		
Q	8/94	0/94	12-9	13-0
R	25/94	16/94	12-9	13-0
S	19/94	15/94	8-1	8-2
T	5/94	2/94	7-3	8-0
U	14/94	12/94	8-7	8-9
V	6/94	4/94	7-1	7-3
W	7/94	4/94	9-2	9-6
X	0/94	0/94	8-1	8-4

Table 2

Photo Articulation and Peabody Picture Vocabulary Tests

Pre- and Posttest Scores for Preschool Children
N = 12

	Photo Articulation Test		Peabody Picture Vocabulary	
Student	Pretest	Posttest	Pretest	Posttest
A	44/94	17/94	7-6	8-6
B	29/94	16/94	4-3	6-4
C	25/94	11/94	6-3	7-0
D	20/94	5/94	6-6	5-10
E	14/94	9/94	6-10	6-10
F	27/94	2/94	8-3	7-3
G	12/94	0/94	6-8	8-9
H	24/94	13/94	6-10	9-4
I	20/94	15/94	6-8	5-11
J	14/94	8/94	6-10	6-2
K	24/94	14/94	6-3	4-9
L	7/94	0/94	5-7	5-10

Third Party Evaluator's Comments:

Those data submitted for objectives 1 and 2 indicate that both objectives have been met.

In Table 1, 22 of 24 (92%) of the EMR and TMR students made gains on PAT. Data submitted for the Peabody Picture Vocabulary Test indicate that 16 of 22 (72%) students made gains during the project year.

The second objective dealt with preschool children with communication disorders. Both the PAT and Peabody Picture Vocabulary Test were given. The results indicate that 12 of 12 (100%) of the children made gains in the Photo Articulation Test and 6 of 12 (50%) of the children showed gains after taking the Peabody Picture Vocabulary Test.

Baker County IED is to be congratulated for adding the Title VI staff to its general fund as a regular school position.

The third party evaluator would like to thank the project staff for submitting additional data which could not be included because of limitations set on the final document's size.

Title of Project:	Baker County IED Program for Visually Impaired Children
Location of Project:	Baker, Malheur, Umatilla and Union Counties
Population Served:	10 Visually Impaired Children
Funding Allocated:	$22,300
Project Beginning Date:	September 1, 1976
Project Ending Date:	June 24, 1977

Background and Rationale:

Eleven visually impaired students, residing in Baker, Malheur and Umatilla Counties had been previously identified and served for four years by the Program under Title VI grants. It was felt by the parents, teachers, and itinerant teacher involved that continued supportive services should be supplied to eight of these children to assist them to remain successfully in local settings. During the course of the year one new child moved in and then away; one new student from Union County was included in the program toward the end of the year; a former student who had moved away, returned; a child under the age of four had to be deprived of official service; a new student with a terminal illness was included until his death. Thus, ten children were being served in four counties at the end of the year. Reports on those ten will be included here.

Methodology:

This project employed one itinerant teacher. The itinerant teacher had a master's degree in education of the visually impaired, had training in orientation and mobility, and training in the teaching of daily living skills. In addition to the itinerant teacher there were aides, physical and speech therapists, readers, and volunteers who worked with children served by the program. (All supplementing the work of parents and classroom teachers with each of the students.) The itinerant teacher maintained a regular schedule with each of the students who were located in Baker, Richland, Adrian, Harper, Pendleton and La Grande schools. Instruction was provided in a variety of academic and living skill areas. Each student was seen for approximately two hours each week by the itinerant teacher. Major camping experiences were conducted during the winter and spring for all of the older children. Trips to see Jose Feliciano and George Shearing were made during the year.

Objectives:

1. To provide a program for visually impaired children in a rural area. Participants will receive supplementary individual instruction.

Evaluation: Pre- and posttest results of the Roswell-Chall Reading Diagnostic, the KeyMath Diagnostic Test, Living Skills Checklist, etc., will be recorded and reported for selected children. A Braille checklist will also be used for selected children.

Results: Results by each student follow (skill areas mastered previous to the current project year are not included).

Student A (Age 10, fifth grade)

Math (KeyMath Diagnostic). Student has mastered computation with:

	Pretest (6/1/76)	Posttest (5/2/77)
Addition		
Single Digit Numbers	X	X
Multiple Digit Numbers	X	X
Using Decimals	X	X
Fractions		X

Student A, Continued

	Pretest	Posttest
Subtraction		
Single Digit Numbers	X	X
Multiple Digit Numbers	X	X
Using Decimals		X
Fractions		
Multiplication		
Single Digit Numbers	X	X
Multiple Digit Numbers	X	X
Using Decimals		X
Fractions		
Division		
Single Digit Numbers		X
Multiple Digit Numbers		X
Using Decimals		X
Fractions		X
Braille Skills		
Punctuation Marks	(5/24/76) 27/31	(1/10/77) 31/31
Mathematical Symbols	(5/24/76) 13/42	(4/25/77) 16/42
Typing	(5/24/76) 18/19 23 wpm	(2/1/77) 19/19 25 wpm
Living Skills		
Sweeping floor	(6/7/76) 4/6	(5/9/77) 5/6
Table wiping	(6/7/76) 3/5	(5/24/77) 5/5
Fold T-shirt	(6/1/76) 2/5	(5/24/77) 2/5
Change pillowcase	(5/4/76) 3/4	(3/14/77) 4/4
Makes bed	(3/16/76) 0	(5/9/77) 5/7

Student A, Continued

Living Skills, Continued	Pretest	Posttest
Affixes blanket	(3/16/76) 2/5	(3/14/77) 5/5
Folds blanket	(3/16/76) 1/5	3/15/77) 5/5
Changes bed	(3/14/77) 5/17	(5/9/77) 8/17
Basic cooking	(9/20/76) 0	(5/23/77) 1/5
Uses key	(9/13/76) 1/4	(5/9/77) 4/4
Lights matches	(9/13/76) 1/4	(5/24/77) 2/4

Student B (Age 14, eighth grade)

Student B mastered all academic and living skill minimum expectations at the completion of the last school year. Itinerant teacher contact this year has been only on a bi-monthly basis, to serve a counseling function and to help in material flow.

Student C (Age 7)

On all behaviors serving as developmental criteria for indicating progress for Student C (sitting, standing, crawling, sound production, etc.) he has shown no change from last year. He continues to be at a developmental level of less than six months. He continues to be seizure involved.

Student D (Age 14, seventh grade)

The following indicates the areas of need for this student based on the Roswell-Chall Diagnostic Reading Test. The pupil needs help in:

Student D, Continued

	Pretest Form II (5/27/76)	Posttest Form I (5/13/77)
1. Single consonant sounds		
2. Consonant combination		
3. Short vowels		
4. Rule of silent E		
5. Vowel combination	X	
6. Syllabication	X	X
Reading speed	(6/4/76) 10 wpm	(5/6/77) 16 wpm

Math (KeyMath Diagnostic). Student D has mastered computation with:

	Pretest (5/27/76)	Posttest (5/13/77)
Addition		
Single Digit Numbers	X	X
Multiple Digit Numbers	X	X
Using Decimals		X
Fractions		
Subtraction		
Single Digit Numbers	X	X
Multiple Digit Numbers		
Using Decimals		
Fractions		
Typing	(9/75) 0	(5/6/77) 10/19 4 wpm
Living Skills		
Folding blanket	(5/14/76) 4/5	(3/18/77) 5/5
Telling time	(5/28/76) 10/11	(3/18/77) 11/11
Handling money	(5/28/76) 8/13	(5/13/77) 9/13
Hangs slacks	(2/6/76) 0	(4/1/77) 3/3

Student D, Continued

Living Skills, Continued	Pretest	Posttest
Folds shirts	(9/17/76) 2/4	(4/22/77) 4/4
Spreading	(9/17/76) 1/5	(5/15/77) 3/5
Package wrapping	(9/17/76) 0	(5/13/77) 1/6

Student E (Age 10, fourth grade)

On the Roswell-Chall Reading Diagnostic Student E showed need of improvement in the following areas:

	Pretest Form I (6/2/76)	Posttest Form II (5/11/77)
1. Single consonant sounds		
2. Consonant combination		
3. Short vowels	X	
4. Rule of silent E	X	
5. Vowel combination	X	X
6. Syllabication	X	X
Reading speed	(5/27/76) 10 wpm	(4/27/77) 32 wpm
Dolch Word Knowledge	(5/26/76)	(4/13/77)
Primer	50/52	52/52
First grade	34/41	41/41
Second grade	31/46	46/46
Third grade	30/41	41/41

Math (KeyMath Diagnostic). Student E has mastered computation with:

	Pretest (5/26/76)	Posttest (5/16/77)
Addition		
Single Digit Numbers	X	X
Multiple Digit Numbers		
Using Decimals		
Fractions		

Student E, Continued

	Pretest (5/26/76)	Posttest (5/16/77)
Subtraction		
Single Digit Numbers	X	X
Multiple Digit Numbers		
Using Decimals		
Fractions		

Student E made no apparent gain in math.

Typing	(6/10/76) 8/19 No measure of speed	(4/27/77) 14/19 12 wpm
Living Skills		
Makes bed	(6/2/76) 4/6	(1/19/77) 6/6
Changes bed	(6/2/76) 10/16	(5/4/77) 14/16
Handling money	(6/2/76) 3/13	(5/4/77) 4/13
Pins	(9/8/76) 0	(1/12/77) 3/3
Folds T-shirt	(9/8/76) 1/5	(12/1/76) 5/5
Sweeps floor	(4/2/75) 0	(5/4/77) 6/6
Can opening	(9/8/76) 0	(5/18/77) 5/5

Student F (Age 4)

Student F has made moderate gains this year. At the beginning of the year she would not chew solid foods; now she is chewing thoroughly and with enjoyment, a wide variety of solid foods. At the beginning of the year she was being caught about half the time for toileting; now she seldom has an accident, she toilets herself independently. At the beginning of the year

Student F, Continued

she had a 30-40 word vocabulary; now she has a usable vocabulary which is nearly unbounded. She can imitate most words at will, and she is beginning to string 3-4 words together in sentences. Student F has made good gain socially--at the beginning of the year she engaged in very little play with other children; now she enjoys a few beginning small group games with other children.

Student G (Age 11, fifth grade)

On the Roswell-Chall Reading Diagnostic Student G showed need of improvement in the following areas:

	Pretest Form II (5/26/76)	Posttest Form I (5/11/77)
1. Single consonant sounds		
2. Consonant combination		
3. Short vowels		
4. Rule of silent E		
5. Vowel combination	X	
6. Syllabication	X	X

Dolch Word Knowledge	Pretest (6/9/76)	Posttest (3/3/77)
Pre primer	39/40	40/40
Primer	52/52	52/52
First grade	37/41	41/41
Second grade	42/46	46/46
Third grade	37/41	41/41
Reading speed	(5/19/76 25 wpm	(4/27/77) 27 wpm

Math (KeyMath Diagnostic). Student G has mastered computation with:

Addition	(5/26/76)	(5/5/77)
Single Digit Numbers	X	X
Multiple Digit Numbers	X	X
Using Decimals		X
Fractions		

Student G, Continued

Subtraction	Pretest (5/26/76)	Posttest (5/5/77)
Subtraction		
Single Digit Numbers	X	X
Multiple Digit Numbers		X
Using Decimals		X
Fractions		
Multiplication		
Single Digit Numbers	X	X
Multiple Digit Numbers	X	X
Using Decimals		X
Fractions		
Division		
Single Digit Numbers		X
Multiple Digit Numbers		
Using Decimals		
Fractions		
Braille Skills (Reading & Writing)		
Alphabet	(9/16/76) 0	(12/15/76) 26/26
Contractions and Abbreviations	(9/30/76) 0	(5/11/77) 30/189
Punctuation	(9/30/76) 0	(5/11/77) 1/31
Typing	(9/16/77) 0	(5/11/77) 15/19 (No measure of speed yet)

Student H (Age 11, sixth grade)

Student H rejoined the program midway through the year.

Math (KeyMath Diagnostic). Student has mastered computation with:

Addition	(5/26/76)	(5/12/77)
Single Digit Numbers	X	X
Multiple Digit Numbers	X	X
Using Decimals	X	X
Fractions		

Student H, Continued

	Pretest (5/26/77)	Posttest (5/12/77)
Subtraction		
Single Digit Numbers	X	X
Multiple Digit Numbers		X
Using Decimals	X	X
Fractions		
Multiplication		
Single Digit Numbers	X	X
Multiple Digit Numbers		X
Using Decimals	X	X
Fractions		
Division		
Single Digit Numbers	X	X
Multiple Digit Numbers		
Using Decimals		
Fractions		
Cooking	(5/19/76) 2/5	(5/19/77) 3/5
Typing	(6/2/76) 15/19 9 wpm	(5/17/77) 16/19 11 wpm

Student I (Age 8, third grade)

Reading Speed	(5/19/76) 24 wpm	(5/11/77) 30 wpm

Math (KeyMath Diagnostic). Student I has mastered computation with:

Addition	(5/27/76)	(5/5/77)
Single Digit Numbers	X	X
Multiple Digit Numbers	X	X
Using Decimals		X
Fractions		
Subtraction		
Single Digit Numbers	X	X
Multiple Digit Numbers	X	X
Using Decimals		X
Fractions		

Student I, Continued

	Pretest (5/27/76)	Posttest (5/5/77)
Multiplication		
Single Digit Numbers	X	X
Multiple Digit Numbers		X
Using Decimals		X
Fractions		
Division		
Single Digit Numbers		X
Multiple Digit Numbers		
Using Decimals		
Fractions		
Braille Contractions and Abbreviations	(5/26/76) 23/189	(5/26/77) 109/189
Braille Punctuation	0	2/31
Folds blanket	(4/26/77) 3/5	(5/18/77) 5/5

Student J (Age 12, fourth grade)

Student J was part of the program for the last six weeks of the school year. He transferred from the School for the Blind. His major accomplishment was fitting into the public school setting, which he has done admirably. He has learned to set up for math computation more adequately; he has learned to load his own brush when brushing his teeth. More significant reporting will be available in another year.

Third Party Evaluator's Comments:

Again, the project staff completed a thorough and complete final report.

It should be pointed out that the project is the "grandfather" of all VI-B projects insofar as duration. The project has been in existence for

5 years. With the termination of competitive VI-B funds, other funds have to be secured to continue the program.

In reviewing the data submitted by the project, the objective for the project was met.

This project year the itinerant teacher delivered services and training to 10 visually impaired children by orchestrating the services of regular classroom teachers, aides, volunteers, physical and speech therapists and parents.

The project staff is to be commended for completing another successful project year.

Title of Project:	Autistic Satellite Classroom
Location of Project:	Sunset Valley Elementary School Beaverton School District #48
Population Served:	Nine Autistic and Autistic-like Children, three to nine years
Funding Allocated:	$10,000
Project Beginning Date:	August 24, 1976
Project Ending Date:	June 15, 1977

Background and Rationale:

The Autistic Satellite Classroom was established to provide an appropriate educational environment for the higher-functioning autistic children from various school districts in Portland and the surrounding area. At the outset of the project, the children demonstrated a readiness for a public school classroom situation in which (1) instruction is provided primarily in a small group; (2) the curriculum includes instruction in language, pre-academic and academic skills, social and independent behaviors; and (3) as part of their daily educational experiences, the children have opportunities to participate in activities with "normal" school-aged peers.

The Autistic Satellite Classroom was designed to fulfill several educational gaps. First, it provided a model for educating and integrating autistic students within a public school setting. Second, it served as a transitional program between a University-based educational setting where the children received primarily language instruction in a 1:1 situation, and the children's residential district where they would receive instruction in a variety of skill areas within a public school special classroom, resource room, or regular classroom.

Methodology:

The Autistic Satellite Classroom provided its students with a broad curriculum in a small-group instructional mode.

A major component of the curriculum was the teaching of spontaneous language. The language program adapted and expanded upon was Signed Speech Treatment developed by Schaeffer, Kollinzas, Musil and McDowell at the University of Oregon. The specific Signed Speech Treatment mode and content objectives chosen for each child were determined during the baseline period after the administration of language assessments, and were directly related to the language skills which the child needed to learn. Children who were non-verbal or minimally verbal were instructed first in signs and later in signed speech (the simultaneous production of signs and spoken words). If their signed speech was spontaneous, and if their speech, as they produced signed speech was articulate, their signs were faded out leaving them with spontaneous speech. Children who used speech for communication purposes but whose speech was unclear were taught to be more articulate as they spoke. Further, the children received instruction in the major content areas of the Signed Speech language program: (a) Intentionality, using language to express one's needs and desires, such as the request, "I want (x)" and the concepts, "yes" and "no," related to wants; (b) Reference, using language to describe various aspects of one's environment, such as object labels and colors; (c) Person Concepts, using language related to people such as names, possession, actions, emotions, social greetings, direct address and calling; (d) Inquiry Skills, using language related to search and inquiry such as spatial location terms and questions; (e) Abstraction, using abstract terms such as personal and possessive pronouns, time and sequence concepts, number concepts.

Another major component of the curriculum was the teaching of preacademic and academic skills. The curriculum adapted for this purpose, and appropriate for eight of the nine students, was the TMR Writing, Reading and Math task sequences developed by the Beaverton TMR staff. The highest level student in the class was instructed in Reading, Math and Writing on programs similar to those used with students in the first through fourth grades.

Other major components of the curriculum included instruction in skills related to independence such as seatwork, appropriate play and self-help; and the promotion of social skills such as participation in small group instruction and cooperative play.

When necessary, behavior intervention programs were designed, implemented, and evaluated to reduce the occurrence of inappropriate behaviors.

All children were integrated for part of their school day into activities with regular students in the school.

Objectives:

1. The students will use verbal language, signed language, or signed speech spontaneously to communicate.

Evaluation: Pretest and posttest probe data on target language objectives were gathered once each week. The criterion for mastery of the language objectives was defined as 90% correct spontaneous responses on each of two consecutive posttests.

Results: The amount of instructional time spent teaching language to each of the students ranged from a total of 3¼ hours to a total of 11¼ hours per week. Children who displayed few communication skills at the outset of the school year and who, therefore, required more intensified language instruction, spent approximately 45% of their school day in language instruction. Students most advanced in language at the beginning of the school year, and who displayed a readiness for academic work, spent approximately 10-20% of their school day in language instruction.

Figure 1 shows the total number of language and speech objectives mastered by each child during the year. This figure represents a mean of 101 objectives mastered by each of the nine students involved. It is significant to note here that of the three children for whom instruction in signs was appropriate, one child advanced from spontaneous signs through spontaneous signed speech to spontaneous speech; and the other two students increased the frequency and clarity of their verbalizations while spontaneously producing signed speech.

FIGURE 1
Language and Speech Objectives Mastered

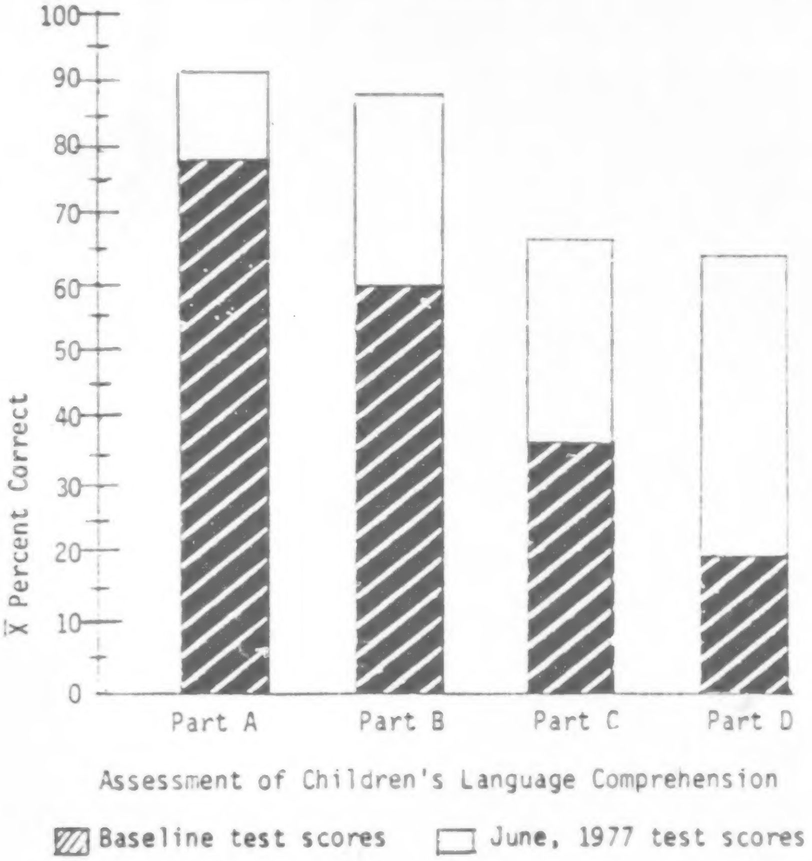
Student	Total time spent per week in language instruction	Total number of concepts mastered	Total number of multi-concept constructions mastered	Total number of sounds, sound clusters, and words mstrd.	Total
1	195 min.	4	15	Not Applicable	19
2	195 min.	1	22	Not Applicable	23
3	235 min.	32	8	Not Applicable	40
4	282.5 min.	55	20	11	86
5	370 min.	61	24	22	107
6	520 min.	70	15	26	111
7	520 min.	83	20	38	141
8	675 min.	136	11	28	175
9	675 min.	103	19	85	207

2. The students will employ complex language concepts and constructions when communicating.

Evaluation: The Assessment of Children's Language Comprehension (ACLC) was administered during the baseline period and three additional times throughout the year.

Results: The ACLC is a receptive language test comprised of four parts. Part A assesses the child's understanding of individual vocabulary items: agents, actions, objects, locations and attribution terms. Parts B, C and D test the child's receptive understanding of constructions containing two, three or four critical elements respectively (e.g., "man sitting," "boy riding the horse," "clown eating the big apple"). Figure 2 illustrates the students' mean increase in percent correct responses on each part of the ACLC from the baseline period to the final testing in June, 1977. Particularly significant are the gains the children made in their understanding of utterances containing two or more critical elements. The class average score for the entire ACLC at baseline was 48.28%, while their average score for the entire test at the end of the school year was 77.39%, representing an average overall gain of 29.11% for each of the nine students.

FIGURE 2



3. The students will initiate and engage in conversations.

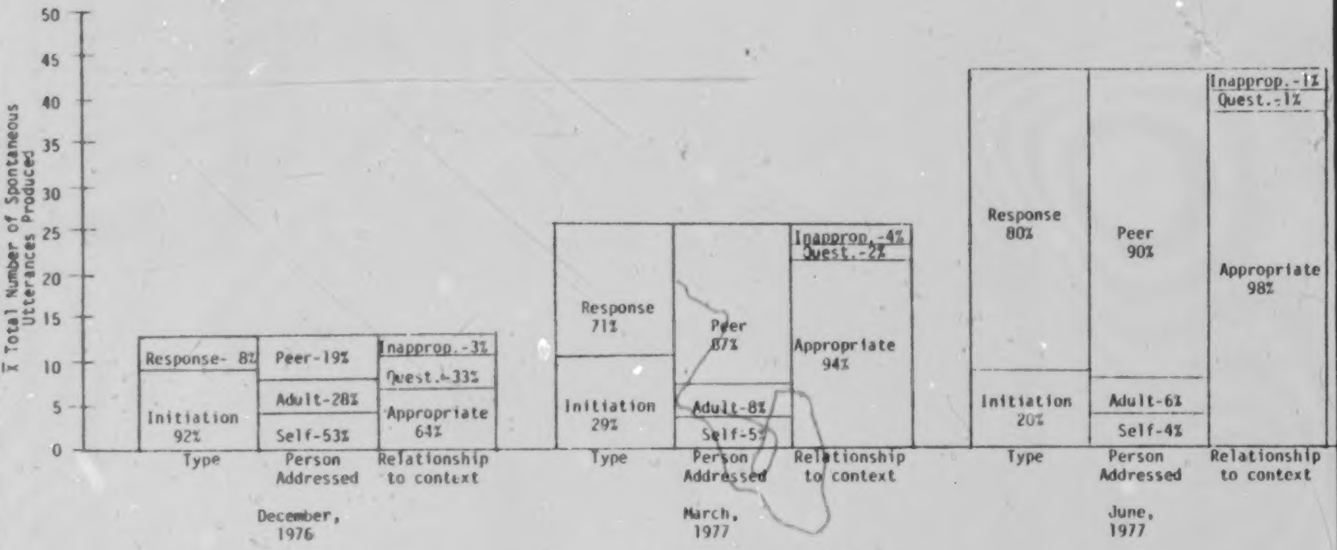
Evaluation: Two types of evaluation instruments were used to measure the increased generalization of each child's expressive language skills: (a) Samples of Spontaneous Appropriate Verbalizations were gathered on the Behavior Observation form; (b) On a Sample of Spontaneous Utterances form, each of the child's spontaneous utterances was evaluated with regard to type (Initiation or Response), person addressed (Self, Adult or Peer), and relationship to context (Appropriate, Inappropriate or Questionable). Both samples (the Sample of Spontaneous Appropriate Verbalizations and the Sample of Spontaneous Utterances) were gathered simultaneously during a 10-minute free play period involving two of the observed student's classroom peers and three second graders.

Results: The percentages of time in which each of the children engaged in spontaneous conversations during the free-play generalization period increased during the year. The average percent of occurrence of spontaneous, appropriate verbalizations, for each of the nine children, in December, 1976, March, 1977 and June 1977 are as follows: December - 4.44%, March - 29.72%, June - 33.33%.

Further, the mean total number of spontaneous utterances produced by each of the nine children during the free-play generalization period increased from 12.89 in December, 1976 to 43 in June, 1977 (see Figure 3). Figure 3 illustrates a marked decrease from December to June in the mean percentages of inappropriate or questionable initiations directed to the self and a marked increase from December to June in the mean percentages of appropriate responses directed to peers.

Since, during the initial free-play observations, the second graders initiated an average of less than 1 verbal exchange to the observed students, they were, during later observations, given instruction to "teach the children to talk" essentially by modeling appropriate language for them and by directing

FIGURE 3


X̄ Total Number of Spontaneous Utterances Produced
50
45
40
35
30
25
20
15
10
5
0
Response- 8%
Initiation 92%
Peer-19%
Adult-28%
Self-53%
Inapprop.-3%
Quest.-33%
Appropriate 64%
Type
Person Addressed
Relationship to context
December, 1976
Response 71%
Initiation 29%
Peer 87%
Adult-8%
Self-5%
Inapprop.-4%
Quest.-2%
Appropriate 94%
Type
Person Addressed
Relationship to context
March, 1977
Response 80%
Initiation 20%
Peer 90%
Adult-6%
Self-4%
Inapprop.-1%
Quest.-1%
Appropriate 98%
Type
Person Addressed
Relationship to context
June, 1977

questions to them. As a result of these instructions, the second graders increased their verbal initiations to the observed child to an average of 36.89 utterances by June, 1977.

4. The students will participate in and profit from small group instruction.

Evaluation: The mean percent of time each child spent involved in group instruction was recorded.

Results: Most instructional skills were taught to the children in small groups which ranged in size from a 2:1 to a 9:1 student:staff ratio. During the year, each of the children engaged in group instructional activities an average of 95.98% of the time.

5. The students will engage in cooperative play activities with peers.

6. The students will play appropriately with toys/playground equipment for short period of time without supervision.

Evaluation: Ten minute samples of play behaviors (Isolated Play, Parallel Play and Cooperative Play) were gathered periodically from December, 1976 to June, 1977 in two types of free-play situations: (a) unstructured play in the classroom involving three students from the Autistic Satellite Classroom and three students from a second grade class; (b) unstructured play on the school playground (i.e., recess) involving eight students from the Autistic Satellite Classroom and all students from the first and second grades.

Results: Figure 4 illustrates the mean percent of time that each of the nine students in the Autistic Satellite Class engaged in play behaviors during the free-play generalization period in the classroom. As can be seen in the figure, from December, 1976 to June, 1977 isolated play decreased while both parallel play and cooperative play increased. The total time spent involved in play increased from a mean of 53.54% in December, 1976 to a mean of 70.28% in June, 1977 for each of the nine students involved.

FIGURE 4

Free-Play Observation in Classroom

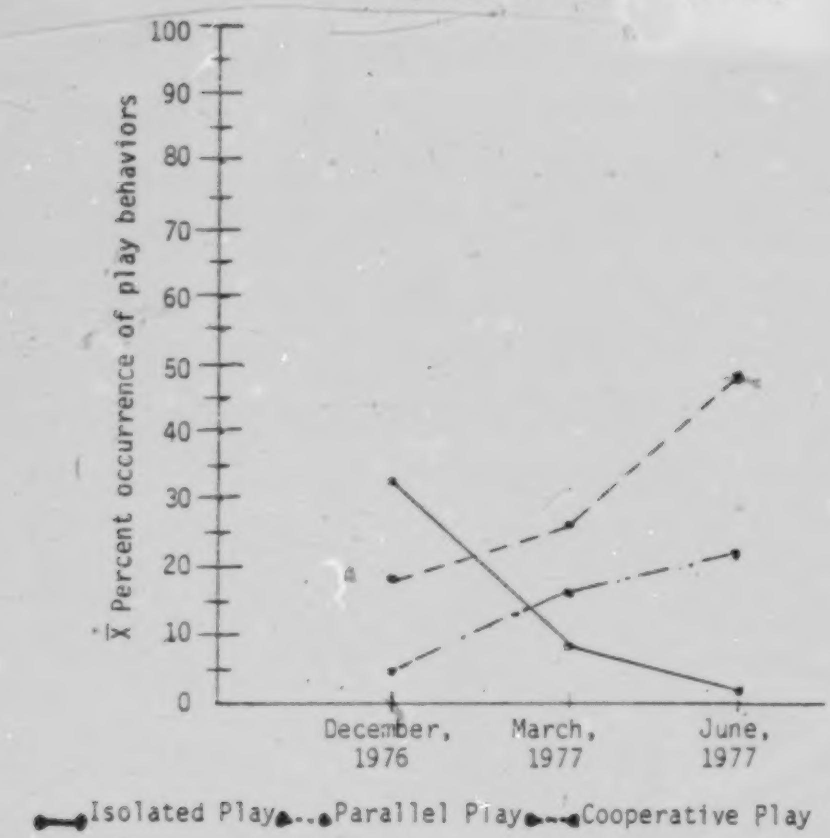
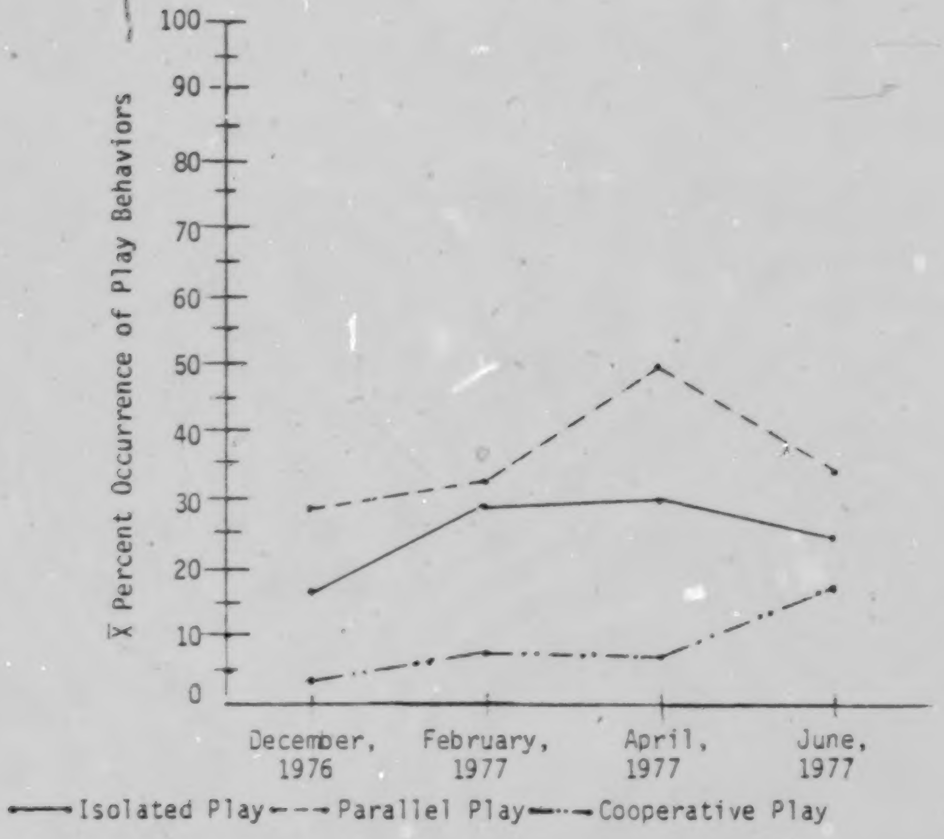


Figure 5 illustrates the mean percent of time that each of eight students from the Autistic Satellite Class engaged in play behaviors during the free-play generalization period on the school playground. An interesting pattern is evident if one examines the marked increases in play behaviors from one observation period to the next. From December, 1976 to February, 1977, isolated play increased from a mean of 16.19% to a mean of 28.44%; from February, 1977 to April, 1977, parallel play increased from a mean of 30.63% to a mean of 49.29%; and from April, 1977 to June, 1977, cooperative play increased from a mean of 6.79% to a mean of 15.94%. The total time spent involved in play increased from a mean of 47.56% in December, 1976 to a mean of 70.63% in June, 1977 for each of the eight students involved.

FIGURE 5

Free-Play Observation on School Playground



7. The students will engage in self-help activities independent of an adult.

Evaluation: An objective performance checklist containing target self-help behaviors was used at the beginning and end of the year.

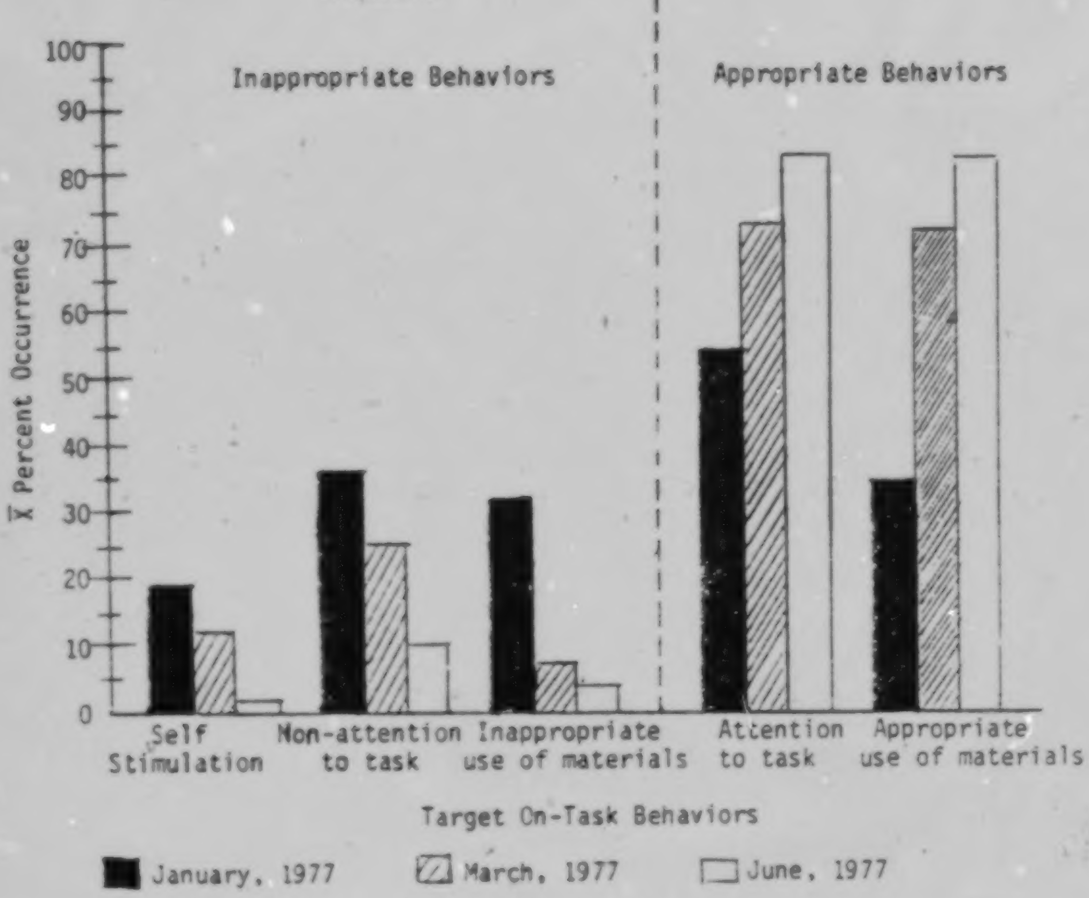
Results: The self-help behaviors focused on in the Autistic Satellite Classroom were related to the daily classroom routines the students needed to learn: (a) hanging up and getting one's coat; (b) getting and returning a cafeteria lunch tray and utensils; (c) following a toileting routine (removing pants, sitting on or standing next to a toilet, eliminating, using toilet paper, flushing the toilet, and raising one's pants); and (d) demonstrating bladder control. Of the seven children who needed to learn to independently follow the routine of hanging up their coats at the beginning of the day and getting them at the end of the day, all seven children succeeded in accomplishing this task by June, 1977. Of the five children who typically ate the cafeteria lunch and, thus, needed to learn the routine of getting a lunch tray and utensils, and then returning them at the end of the meal, four children successfully learned to follow the routine by June, 1977 and one child (because of her small size and present difficulty reaching utensils on the "high" counter) still requires minimal assistance. Of the eight children who needed to learn to follow a toileting routine with only a very minimum amount of assistance, all eight succeeded in accomplishing this goal by June, 1977. Of the three children who demonstrated problems with bladder control at the beginning of the school year, all three became bladder trained by June, 1977.

8. The students will engage in individual seatwork activities for short periods of time without supervision.

Evaluation: Five minute samples of the behaviors each child displayed during an unsupervised (generalization) seatwork period were gathered periodically from January, 1977 to June, 1977. The behaviors observed were attention to task, appropriate use of materials, self-stimulation, non-attention to task, and inappropriate use of materials.

Results: Figure 6 indicates the students' marked increases from January to June, 1977 in appropriate on-task behaviors: attention to task and appropriate use of materials; and their marked decreases from January to June, 1977 in inappropriate behaviors during seatwork periods: self-stimulation, non-attention to the task, and inappropriate use of materials.

FIGURE 6



9. The students will engage in preacademic and academic tasks.

Evaluation: Reading, Math, and Writing task sequences designed for TMR level students were administered to the students during the baseline period and periodically throughout the year. The highest level student in the class who, at baseline, was able to perform all the objectives in the task sequences, was evaluated on standardized tests and criterion-referenced tests.

Results: Figure 7 shows the total number of writing and reading objectives listed on the TMR task sequences that each of eight students mastered. The total number of math objectives listed on the TMR Math Sequence, mastered by each of three students is also indicated. (Children were chosen for Math instruction who were ready to learn the abstract language skills on the Signed

FIGURE 7
Total Number of Objectives from Task Sequences Mastered

Student	Writing	Reading	Math
1	12	133	16
2	15	106	51
3* -	N.A.*	N.A.*	N.A.*
4	18	65	16
5	24	58	N.A.
6	13	32	N.A.
7	18	50	N.A.
8	6	2	N.A.
9	10	10	N.A.

* This student was administered standardized tests and criterion-referenced tests since, at baseline, he was able to perform all objectives on the task sequences.

Speech Treatment hierarchy and who no longer required instructional time in articulation.) The mean total number of writing objectives mastered by each of the eight students involved was 14.5. The mean total number of reading objectives mastered by each of the eight students involved was 57. The mean total number of math objectives mastered by each of the three students involved was 27.67.

The highest level student who, at baseline placed beyond the TMR task sequence, performed in the following fashion on standardized and criterion-referenced tests:

Reading

1. Slossan Oral Reading test (test of work recognition): 11/30/76 - 5.4; 6/10/77 - 6.5.
2. Individual I.R.S. (test of reading comprehension): 11/30/76 - Grade 1; 6/10/77 - Grade 3.

3. Sullivan Reading Progress tests, Series 1 and 2, 16 tests, $\overline{X}$ score = 90.31%.

Math

1. Sullivan Math tests, Books 5-7, 6 tests, $\overline{X}$ score - 100%.
2. Student reached criterion level of performance (90% or more) on 23 objectives related to math computation and reasoning.

Writing

1. Student reached criterion level of performance on 14 objectives related to creative writing.

10. The student's inappropriate behaviors will be reduced.

Evaluation: Ten minute samples of self-stimulatory behaviors were gathered periodically from December, 1976 to June, 1977 in two types of free-play situations: (a) unstructured play in the classroom involving three students from the Autistic Satellite Classroom and three students from a second grade class; (b) unstructured play on the school playground involving eight students from the Autistic Satellite Classroom and all students from the first and second grades.

Results: Behavior intervention programs were designed and implemented throughout the year to reduce the children's frequency of self-stimulatory behaviors. Samples of self-stimulatory behaviors gathered during the free-play periods revealed whether or not the reduced occurrence of self-stimulatory behaviors had generalized to unstructured situations in the classroom as well as free-play periods on the playground. The mean percent of time each of the nine children spent engaged in self-stimulatory behaviors during the free-play generalization period in the classroom was 37.22% in December, 1976. By March, 1977, self-stimulation in this situation had decreased to a mean of 13.33% and by June, 1977, it had decreased to a mean of 5%. The mean percent of time each of eight children spent engaged in self-stimulatory behaviors during recess on the playground was 30.31% in December, 1976. By March, 1977, self-stimulation on the playground had decreased to a mean of 15.07%, and by June, 1977, it had decreased to a mean of 5.63%.

11. The students will comply to commands (90% of the time).

Evaluation: Samples of compliance to commands were gathered periodically from January to June, 1977.

Results: While involved in a free-play situation in the classroom, each student was given 10 simple commands relevant to the situation. The child was rated with a "t", indicating compliance if he/she followed the directive within five seconds or made an attempt to do so; the student was given an "o", indicating noncompliance, if he/she did not follow the command. The mean percents of compliance for each of the nine children during January, March and June, 1977 are as follows: 88.75%; 96.67%; and 98.89%.

12. The students will participate in nonacademic and academic activities with "normal" peers.

Evaluation: Samples of the student's behaviors were gathered during integrated activities.

Results: Figure 8 shows a Hierarchy of Integration Activities which the students from the Autistic Satellite Classroom participated in. As can be seen from the figure, all nine students began participating in integrated activities at least minimally at the outset of the school year (Level 1). During the course of the year, more integration activities were added so that by June, 1977, seven integration levels were available to the students. Since the activities at Levels 3 through 7 required no supervision or minimal supervision (the staff member from the Autistic Satellite Class encouraged appropriate behavior in the regular class setting only when necessary), a student was chosen

FIGURE 8
Hierarchy of Integration Activities*

Level of Integration	September 1976-December 1976	December 1976-March 1977	March 1977-June 1977
1. Cafeteria, Recess, Assemblies (225 minutes/week)	1,2,3,4,5,6,7,8, 9.	1,2,3,4,5,6,7,8, 9.	1,2,3,4,5,6,7,8, 9.
2. Group Games and Songs: Involves Autistic Satellite Class and 10-20 third and fourth graders. (150 min./wk)		1,2,3,4,5,6,7,8, 9.	1,2,3,4,5,6,7,8, 9.
3. Lunch Attendance with Regular Class. (150 minutes/week)		3,5.	3,5,7.
4. Music Class (100 minutes/week)		3,7.	3,6,7.
5. Reading Group (150 minutes/week)		2.	**
6. Art Class (60 minutes/week)			3,5.
7. Math Class (60 minutes/week)			3.

* The numbers within each box indicate which of the students from the Autistic Satellite Classroom participated in the activity.

** This activity was discontinued due to the Reading Specialists hospitalization. A reorganization of the reading groups by the substitute made the group which this student was involved in far too advanced for him.

for these activities who met two criteria: (1) he/she could speak clearly when communicating; (2) his/her severe inappropriate behaviors (such as aggression, self-injury, screaming) had been completely eliminated. Two children, as they produced signed speech, were somewhat inarticulate and, therefore, were not chosen for integration at Levels 3 through 7. Two children, although their severe inappropriate behaviors decreased greatly during the year, continued to require the consistent application of previously effective intervention programs whenever the severe inappropriate behaviors did arise. Thus, they were not chosen for integration at Levels 3 though 7. By June, 1977, five of the nine students had participated in classroom activities with "normal" peers. These students had met the two criteria for integration at Levels 3 through 7.

Third Party Evaluator's Comments:

During the six years this third party evaluator has reviewed and edited final reports from Title VI-B projects, this final report is one of the best that has been submitted by a public school program. The project was comprehensive (twelve objectives), the data submitted demonstrates that all objectives were met. The data were displayed in simple figures and tables which are easily read and understood. The project staff are to be commended for their efforts in this project for exemplary performance.

Title of Project: Intercept - An Educational Resource Program

Location of Project: South Lane School District
Cottage Grove

Population Served: Secondary level students identified as learning disabled and/or emotionally handicapped.

Funding Allocated: $42,000

Project Beginning Date: September 1, 1976

Project Ending Date: June 30, 1977

Background and Rationale:

The project was undertaken to extend services and provide additional educational opportunities for secondary level students with learning disabilities and/or emotional handicaps. The program was specifically intended for either (1) students who had dropped out of or been excluded from school because of their problems or (2) students who were currently learning disabled and/or emotionally handicapped and in need of additional special education.

Methodology:

The project was conducted in two classrooms based on the resource room model, one in the junior high and one in the senior high school. Students divided the school day between the resource center and the regular classroom activities as appropriate.

Initially former students who had dropped out of or been excluded from school were located and invited to return to school and participate in the resource program. In addition, students already in school who were displaying significant problems were screened and given a diagnostic evaluation in order to determine if they met the criteria for the learning disabled and/or emotionally handicapped program. Those meeting the criteria were invited to participate in the program. Each program participant was administered the Wide Range Achievement Test (WRAT) on a pre- posttest basis, and had an individualized instructional plan written for him/her based on the results of the diagnostic evaluation. Both academic and/or behavioral programs were then developed as appropriate. Throughout the year, the individualized instructional plans were updated and reviewed as the student progressed and worked toward meeting individual and program objectives.

Objectives:

1. Eighty percent of the children enrolled in the resource rooms will show an increase in the following academic areas: reading, math, and spelling.

Evaluation: The Wide Range Achievement Test (WRAT) will be administered on a pre- posttest basis and the differences will be recorded and reported.

Results: A total of 65 students participated in the learning resource rooms during the 1976-77 school year, 43 at Cottage Grove High School, and 22 at Lincoln Junior High School. Students who remained in school and involved in the programs participated in the programs for time periods varying from eight to 31 weeks in length. At the Junior High School level two students dropped out of the program after approximately 6 months in the program. At the high school level 11 students dropped from the program but generally after less than two months involvement in the program.

Table 1 shows the pretest, posttest and difference scores for the 22 junior high school students who participated in the resource room program. A total of 18 students received individual instruction in reading and had both pre and posttest administrations of the WRAT. Of these 18 students,

Table 1

Junior High School WRAT Scores - Resource Room

Student	# Weeks in Program	Reading			Arithmetic			Spelling		
		Pre	Post	Diff	Pre	Post	Diff	Pre	Post	Diff
1	22	4.2	4.2	0	3.9	3.4	- .5	2.6	2.6	0
2	15	7.9	7.5	-.4	5.3	6.1	.8	5.2	4.9	- .3
3	15	5.8	8.3	2.5	2.0	3.4	1.4	6.3	6.1	- .2
4	20	5.2	6.3	1.1	4.9	5.7	.8	3.7	4.0	.3
5	29	2.6	Dropped		3.2	Dropped Out		2.5	Dropped Out	
6	29	5.6	7.1	.5	3.4	6.9	3.5	3.7	4.0	.3
7	27	1.5	2.8	1.3	3.9	4.9	1.9	1.5	2.6	1.1
8	13	4.2	5.4	1.2	6.1	6.5	.4	3.7	3.3	.4
9	18	6.2	7.5	1.3	5.3	4.9	- .4	5.2	6.1	.9
10	16	5.0	3.9	-1.1	2.9	2.9	0	3.0	3.0	0
11	9	7.1	8.3	1.2	3.9	4.4	.5	3.7	4.0	.3
12	27	4.4	Dropped		Dropped Out			2.2	Dropped Out	
13	31	6.0	6.6	.6				6.5	5.2	-1.3
14	29	9.1	9.1	0	3.9	3.4	- .5	6.5	6.7	- .2
15	21				3.9	6.3	2.4			
16	29	2.6	3.5	.9	3.4	3.9	.5	2.6	3.3	.7
17	18	4.4	4.6	.2	3.4	3.4	0	3.3	4.0	.7
18	28				2.9	2.5	- .4			
19	25	5.6	5.8	.2	4.4	3.9	- .5	4.0	4.0	0
20	21	3.9	4.2	.3	3.9	3.9	0	2.6	3.0	.4
21	15	5.0	7.1	2.1	2.9	4.4	1.5	3.7	4.6	.9
22	12	5.0	6.0	1.0	3.0	5.3	2.3			

Table 2

High School WRAT Scores - Resource Room

Student	# Weeks in Program	Reading			Arithmetic			Spelling		
		Pre	Post	Diff	Pre	Post	Diff	Pre	Post	Diff
1	30	6.5	6.2	- .3	3.9	5.7	1.8	3.0	3.7	.7
2	30				3.9	4.4	.5			
3	30	3.2	4.6	1.4						
4	22	6.0	7.7	1.7	4.4	6.3	1.9			
5	7	6.0	Dropped Out		5.7	Dropped Out				
6	30	2.8	3.2	.4	6.1	6.9	.8			
7	30	7.1	10.2	3.1						
8	30	5.0	6.9	1.9				4.3	4.6	.3
9	30	9.9	11.3	1.4	5.3	6.3	1.0	6.7	7.2	.5
10	9	7.3	Dropped Out		3.4	Dropped Out		5.5	Dropped Out	

Table 2 continued.

Student	# Weeks in Program	Reading Pre	Reading Post	Reading Diff	Arithmetic Pre	Arithmetic Post	Arithmetic Diff	Spelling Pre	Spelling Post	Spelling Diff
11	30	6.3	6.8	.5	4.4	6.3	1.9	3.3	3.7	.4
12	9	8.4	Dropped Out		4.7	Dropped Out		6.0	Dropped Out	
13	30				4.9	5.7	.8	6.5	7.4	.9
14	30	4.6	5.2	.6	3.9	3.9		3.7	3.7	--
15	30	4.6	6.3	1.7				3.3	4.3	1.0
16	9	4.4	Dropped Out		3.2	Dropped Out		3.9	Dropped Out	
17	5	8.5	Dropped Out		4.9	Dropped Out		5.3	Dropped Out	
18	30	4.5	4.4	- .1	5.0	4.9	- .1	3.7	3.9	.2
19	30	7.1	9.1	2.0	6.1	7.1	.3	6.7	7.0	1.0
20	8	4.4	6.2	1.8	3.4	5.7	2.3	4.6	5.2	.6
21	16	9.3	10.5	1.2	6.7	7.1	.4			
22	14	6.8	7.1	.3				5.8	6.1	.3
23	14	3.3	Dropped Out		4.9	Dropped Out		3.7	Dropped Out	
24	1	Dropped Out			Dropped Out			Dropped Out		
25	30	Mainstreamed			Mainstreamed			Mainstreamed		
26	16	2.8	4.6	1.8				3.0	3.7	.7
27	16	Tested in Springfield - Scores not comparable.								
28	9	6.0	Dropped Out		3.9	Dropped Out		4.0	Dropped Out	
29	16	7.3	7.9	.6				3.7	6.1	2.4
30	16	7.3	9.6	2.3				7.0	6.7	- .3
31	16	5.0	6.2	1.2				3.7	4.9	1.2
32	12	4.8	6.9	2.1				4.3	5.5	1.2
33	16	4.3	7.1	2.8						
34	30	5.4	7.1	1.7						
35	22	2.6	3.9	1.3	3.4	4.9	1.5			
36	30	6.2	6.9	.7	3.9	4.9	1.0	5.2	6.1	.9
37	16	6.1	8.3	2.2	3.9	4.9	1.0	3.7	4.6	.9
38	10	2.8	3.2	.4	3.6	2.9	- .7	1.3	2.2	.9
39	30	5.0	6.9	.9				4.3	4.6	.3
40	14	3.9	Dropped Out		5.3	Dropped Out		3.0	Dropped Out	
41	2	Dropped Out			Dropped Out			Dropped Out		
42	9	6.8	Dropped Out		4.7	Dropped Out		5.0	Dropped Out	
43	19	9.0	7.9	-1.1	4.7	6.3	1.6	6.0	6.1	.1

111

14 (78%) demonstrated higher posttest scores than they had at pretest administration, two students demonstrated no change and two students scored lower at posttest administration than they had earlier. In arithmetic, 19 students received instruction and had both pre and posttest WRAT administration: 11 (58%) students increased, three students scored the same and five students scored lower at posttesting than they had on the pretest. A total of 17 students received instruction in spelling and had the WRAT administered to them on a pre and posttest basis. Of those 17 students, 9 (53%) increased the posttest scores, 3 remained unchanged and 4 scored lower at posttesting than at pretesting.

Table 2 presents the pre- posttest WRAT scores for students enrolled in the senior high resource room program. At the senior high school level, 28 students received specialized instruction in reading, 15 in math and 20 in spelling. Of those respective students, 26 (93%), 13 (87%) and 19 (95%) showed posttest gains in the respective subtest areas on the WRAT. In summary, the established criterion of 80% improvement in each of the reading, math and spelling areas was not achieved at the junior high school level, while the senior high school students achieved that level in all three subtest areas.

2. To increase or decrease appropriate or inappropriate behavior of selected children.

Evaluation: The behavior will be pinpointed, baseline data will be collected, a criterion level of acceptable performance will be specified, a prescriptive program will be designed and implemented, interim data will be collected until a criterion level of acceptable performance is reached. Probe data will be collected as to the maintenance of this behavior.

Results: (Junior High School.) Several attempts at behavioral programs for students in the Learning Resource Center were made. Although program and record forms per se were set up clearly and instruction was provided to the teachers on many occasions regarding how to conduct a data based behavioral program, only baseline data was gathered. No formal intervention was done nor post-baseline collected. Year end remarks by the teacher suggested that certain success had occurred. Unfortunately, since none of the programs that had been developed by the resource personnel were fully implemented by the junior high teacher, global subjective observations were all that was available to measure the accomplishment of this objective at the junior high school level.

(Senior High School.) An effort was made to increase the task-oriented behavior of five students participating in the Learning Resource Center at the high school. Task-oriented behavior was defined as on-task behavior judged by student's attendance to task of writing, reading, or looking at teacher during class discussion or lecture. Data were gathered during 15 or 30 minute observations at 1 minute intervals. Table 3 presents the baseline, posttest and difference scores for the five student task-oriented behavior programs. In all five cases, the increase in task-orientation was considerable, ranging from a final posttest observation from 60% to 100% of the time.

Table 3

Task Oriented Behavior

Student	Baseline	Post	Difference
1	36	83	47
2	0	60	60
3	20	93	73
4	33	100	77
5	20	73	53

3. To increase the amount of time selected children in the resource room will spend in the regular classroom.

Evaluation: A log will be maintained, the mean number of hours spent by each child in the regular classroom and the mean number of hours each child spends in the resource room will be recorded and reported.

Results: Logs were maintained by both the junior high school and senior high school Educational Resource Center (ERC) personnel of the proportion of each student's time that was spent in the Center over each of the four school quarters. A trend was considered to exist when no change, neither an increase or decrease, was noted for each student during his last two quarters in the Center programs.

Of the 22 students who participated in the junior high school program, 6 (27%) maintained a constant ratio of the time spent in the ERC to time spent in the regular program. Two students (9%) decreased their ratio of time spent in the ERC program and 14 (64%) students increased their ratio of time spent in the ERC program. Of the 43 students who participated in the high school program, 31 (72%) maintained a constant ratio of time spent in the ERC to time spent in the regular program. Five students (12%) decreased their ratio of time spent in the ERC program and 7 (16%) increased their ratio of time spent in the ERC program.

Third Party Evaluator's Comments:

After reviewing the above results it should be evident that the Intercept - Educational Resource Program had considerable difficulty in reaching their established criteria for success. Specifically, the junior high school program fell short of attaining any of the three established objectives. Only in the measured academic areas of reading, math and spelling (Objective 1) did the junior high resource program students approach the anticipated level of development. Demonstrable data were not collected to determine if increased appropriate skills (behaviors) were being acquired at the junior high level. Further, the trend for junior high students was for increased amounts of time spent at the Center rather than in regular classes.

At the senior high level, the overall results more closely approximated the intended results, with two objectives being attained. Both the increased academic (Objective 1) and increased appropriate behavioral (Objective 2) components of the program were achieved at the senior high level. However, the trend away from reliance on the Center by students was far from accomplished.

Although the fact remains that the stated program objectives were only partially met, circumstances in the South Lane School District during the 1976-77 school year undoubtedly contributed to the lessened impact of the Center program. The South Lane School District was one of the few school systems in Oregon that closed their doors to students because district voters failed to pass a revised tax base to support their public schools. Consequently, the South Lane schools were closed for an extended period of time during the fall and winter of 1976-77. Undoubtedly, the interruptions of schools during the academic year had an influence on both student and professional attitudes and performance. Several students enrolled in other operating school systems, but others were happy with the "recess" from school, content to engorge in hours of free time away from the books.

Equally as devastating was the impact on district and project staff. Direct project staff resigned and accepted employment elsewhere, necessitating changes in administration and adjustments to the program. Whether full attainment of objectives would have been accomplished without the interim closure of schools is largely speculative, but more close approximations seem probable.

Title of Project: Prescriptive Classroom for Learning Disabilities

Location of Project: Beaverton School District #48
Highland Park Intermediate School

Population Served: 21 Learning Disabled Students

Funding Allocated: $23,000

Project Beginning Date: August 1, 1976

Project Ending Date: June 30, 1977

Background and Rationale:

Students with learning disabilities were provided for at the elementary level through a comprehensive extreme learning problems program. However, the students received extremely limited or no specialized help at the intermediate level. No programs existed to diagnose or instruct to the needs of the students who were handicapped with specific learning and skill acquisition difficulties.

Therefore, this project was designed to provide for the needs of the intermediate learning disabled student. The program was:

(1) to provide diagnostic/evaluation procedures to specifically diagnose and evaluate students with learning disabilities;

(2) to provide individualized prescriptive programs with individualized instruction so the student can work at his level;

(3) to provide tutor programs for instructing students under the supervision of the professional teacher and instructional aide;

(4) to provide in-service training for mainstream teachers in order to establish an effective integration program for the learning disabled student.

Methodology:

The project began with an in-service program, referrals and initial screening of students. The prescriptive classroom teacher and instructional aide were hired to (1) continue the screening process; (2) set up the classroom, (3) order necessary materials and supplies; (4) do the specific skills evaluation; (5) schedule students into the prescriptive classroom; (6) prescribe programs ~~for the~~ students, and (7) begin instruction.

Student selection for inclusion in the project was based on a diagnostic evaluation of the student's specific disability. The school psychologist, classroom teacher, prescriptive teacher, and outside professionals developed the evaluation.

The procedure for placement of students into the program was dependent on parent/student response, academic evaluation and psychological evaluation. The Peabody Individual Achievement Test was administered as the initial academic evaluation. If the students scored three or more grade levels below grade placement in two or mroe of the four academic areas on the test, they were considered for placement. Students were observed in the classroom. Parents and students were informed of the program and consent for evaluation by the psychologist was obtained. The psychologist who was responsible for the psychometric and disability evaluation used a combination of tests such as the Developmental Test of Visual Motor Integration, Wechsler Intelligence Scale for Children and Harris Test of Laterality. If the psychological criteria were met, the student was scheduled into the classroom.

Nine students from the school year 1975-76 continued in the second year of the Title VI program. When the student had been placed in the program, specific skills were evaluated using a wide range of formal and informal instruments. Among them were the Key Diagnostic Arithmetic Test, informal reading inventories, and the Woodcock Reading Test. The new referrals were processed in the same manner. Intensive programming and one to one instruction by the classroom teacher, instructional aide, and tutors began from one to five periods a day with students scheduled into the program. The tutors from local high schools and Portland State University were trained to use the materials, do record keeping. They were supervised by the prescriptive classroom teacher and instructional aide. Complete records were kept of prescriptions written, tests given, daily activities, student data and conferences held. Students earned points each day that accumulated toward a period during which they had a free choice of activities such as listening to records or playing games. Constant communication and personal contact between the Title VI staff and the students, classroom teachers, administration, and parents were an integral part of the program.

Objectives:

1. Each student will be diagnosed for his/her specific learning disability and evaluated for skills levels.

Evaluation: The total number of children screened will be recorded. A record will be kept on each child placed in the program and this record will contain the following: the test used and the results; the program placement of each child based on these test results; each child will receive instruction in specified areas and data will be collected.

Results: During the two years the Title VI project was funded, a total of 162 students were referred and screened for possible inclusion in the program following the flow chart procedures. One hundred forty-three were referred during 1975-76. Since the extensive screening had taken place, this year 19 additional referrals were made to the program making a total of 162. Twenty-nine students were served in the program during the 1976-77 funding and 21 students were served during the 1976-77 funding which made a total of 50 students receiving the individualized instruction of the 162 students screened.

During 1976-77, the second and final year of the project, nine students continued in the program from the previous year. Of the five students that were waiting for placement, one moved during the summer and four were placed in September 1976. Ten students of the 19 referred qualified for placement, eight were placed with two remaining to be placed at the termination of the project. Nine students referred were not considered for placement because of parent/student disinterest or the student did not meet the psychological and academic evaluation. Of the 21 students served this year there were ten ninth grade students, nine eighth grade students and two seventh grade students. Thirteen students qualified for and were served in math, reading and spelling, seven in reading and spelling and one in math and spelling. Instruction in these specific areas was provided.

2. The student will receive instruction in the following selected areas: writing, reading, math, and spelling.

A formal achievement test will be administered as a pre- posttest program for each student upon entry and again upon exit from the program. A continuous progress evaluation system to document the academic programs for each student in the selected areas of math and writing, reading, spelling and/or math will be conducted. Each student's academic growth relative to specific objectives selected for the student's academic growth will be recorded and reported.

Results: Thirteen students received individual help in reading, spelling, and math, seven students received tutorial help in reading and spelling, and one received help in math and spelling. Four of the 21 students received help in handwriting. The Peabody Individual Achievement Test, Key Math Diagnostic Arithmetic Test and Woodcock Reading Mastery Test and Thorndike Spelling Survey were administered as pre and posttests to evaluate growth made in the areas in which the students received individualized help. See Tables 1, 2 and 3.

Student prescriptions, daily activity records, charts and graphs showing progress, and year end reports to parent and students were maintained on all 21 students during the time they were in the program.

3. To reduce the number of deviant behaviors for selected children in the regular classroom.

Evaluation: Pinpoint the behavior, collect baseline data on that behavior, design and implement intervention strategy, a criterion level of acceptable behavior will be set by the resource teacher and the classroom teacher. The program will be conducted until the criterion level of acceptable behavior is met, subsequently, two probes will be taken on the behavior, one thirty days from termination and one sixty days from termination.

Results: Thirteen students participated in reducing the number of deviant behaviors. One was in two programs resulting in a total of fourteen behavior modification programs. The results of these programs are summarized in Table 4.

Table I

Peabody Individual Achievement Test Results

Student	Math			Reading Recognition			Reading Comp.			Spelling		
	Pre	Post	Dif	Pre	Post	Dif	Pre	Post	Dif	Pre	Post	Dif
1	4.6	6.0	1.4	4.5	5.4	.9	3.8	5.0	1.2	3.5	4.6	1.1
2	4.2	6.7	2.5	6.0	7.3	1.3	5.3	7.5	2.2	3.6	4.2	.6
3	4.6	5.7	1.1	3.1	3.3	.2	2.9	3.6	.7	3.5	3.8	.3
4	5.3	5.3	.0	3.0	3.1	.1	2.8	3.9	1.1	3.5	3.2	-.3
5	4.4	N.A.	N.A.	3.8	N.A.	N.A.	3.9	N.A.	N.A.	3.5	N.A.	N.A.
6				6.6	7.3	.7	8.1	6.8	-1.3	3.7	4.4	.7
7				8.1	11.0	2.9	6.0	8.4	2.4	3.6	4.4	.8
8	5.7	9.9	2.2	7.9	6.4	-1.5	5.5	8.1	2.6	4.9	4.2	-.7
9	7.0	7.6	.6	5.0	7.3	2.3	4.7	6.5	1.8	3.8	3.8	.0
10	4.6	7.0	2.4	5.0	5.4	.4	5.5	6.0	.5	7.1	6.0	-1.1
11	3.7	7.4	3.7	5.0	6.4	1.4	3.5	7.2	3.7	3.7	6.5	2.8
12				6.4	8.1	1.7	4.7	9.2	4.5	4.1	5.3	1.2
13	4.9	6.4	1.5	3.0	4.0	1.0	3.3	5.5	2.2	3.0	3.6	.6
14	5.3	6.4	1.1	3.1	3.5	.4	3.8	4.2	.4	[illegible].3	2.8	.5
15				3.5	4.5	1.0	4.5	4.7	.2	4.6	5.8	1.2
16				4.2	4.5	.3	4.5	5.5	1.0	4.6	4.6	.0
17				4.8	5.8	1.0	5.5	5.3	-.2	3.9	4.1	.2
18				6.4	5.0	-1.4	5.8	7.2	1.4	5.6	5.6	.0
19	6.7	8.2	1.5	5.8	6.0	.2	6.2	8.1	1.9	5.6	6.2	.6
20	4.6	6.0	1.4	5.4	5.8	.4	4.5	5.0	.5	2.5	3.4	.9
21	4.0	6.4	2.4							3.9	4.4	.5
			$\bar{X}$ = 1.7			$\bar{X}$ = .7			$\bar{X}$ = 1.4			$\bar{X}$ = .05
Range			(0 - 3.7)			(-1.5 - 2.9)			(-1.3 - 4.5)			(-1.1 - 2.8)

Table 2

Woodcock Reading Test

Student	Word Identif.			Word Attack			Word Comp.			Passage Comp.		
	Pre	Post	Dif	Pre	Post	Dif	Pre	Post	Dif	Pre	Post	Dif
1	3.4	4.4	1.0	3.9	4.7	.8	3.8	4.4	.6	4.0	4.9	.9
2	4.0	9.1	5.1	12.9	12.9	.0	10.3	11.2	.9	6.0	7.8	1.8
3	2.4	3.0	.6	1.3	2.6	1.3	3.0	2.8	-.2	2.9	3.1	.2
4	6.2	N.A.	N.A.	1.6	N.A.	N.A.	2.9	N.A.	N.A.	3.4	N.A.	N.A.
5	3.2	N.A.	N.A.	3.5	N.A.	N.A.	3.3	N.A.	N.A.	5.1	N.A.	N.A.
6	5.3	6.1	.8	4.2	5.8	1.6	4.2	10.6	6.4	5.7	9.2	3.5
7	7.2	12.9	5.7	7.0	12.9	5.9	9.3	12.9	3.6	6.2	8.4	2.2
8	5.5	9.6	4.1	12.9	12.9	.0	7.1	11.6	4.5	6.9	8.7	1.8
9	4.4	4.5	.1	3.0	5.8	2.8	3.6	10.6	7.0	5.3	6.9	1.6
10	5.1	5.1	.0	6.1	6.1	.0	6.9	6.3	-.6	5.0	7.2	2.2
11	5.1	N.A.	N.A.	12.9	N.A.	N.A.	2.9	N.A.	3.6	3.6	N.A.	N.A.
12	6.2	11.0	4.8	12.3	12.9	.6	4.2	7.1	2.9	5.3	6.2	.9
13	2.8	3.7	.9	2.1	3.7	1.6	3.0	4.1	1.1	2.8	4.2	1.4
14	2.2	2.9	.7	2.1	2.5	.4	2.0	3.6	1.6	2.6	3.3	.7
15	3.4	4.1	.7	5.4	12.9	7.5	4.2	6.3	2.1	4.5	5.7	1.2
16	3.7	4.6	.9	4.4	7.0	2.6	5.8	6.0	.2	4.9	6.9	2.0
17	3.8	6.1	2.3	3.0	3.9	.9	8.4	9.3	.9	4.3	5.7	1.4
18	4.4	4.8	.4	3.9	6.7	2.8	4.6	6.3	1.7	5.9	7.2	1.3
19	4.8	6.7	1.9	7.0	10.1	3.1	10.6	11.1	.5	8.1	8.1	.0
20	3.3	5.2	1.9	4.9	8.1	3.2	4.4	5.1	.7	2.8	3.4	.6
21	did not work in Reading											
			$\overline{X} = 1.9$			$\overline{X} = 2.1$			$\overline{X} = 2.1$			$\overline{X} = 1.4$
Range			(0 - 5.7)			(0 - 7.5)			(-.6 - 7.0)			(0 - 3.5)

Table 3

	Key Math			Thorndike Spell.Survey		
Student	Pre	Post	Dif	Pre	Post	Dif
1	4.4	5.5	1.1	3.0	4.0	1.0
2	5.3	5.6	.3	3.0	4.0	1.0
3	6.1	6.6	.5	2.0	3.0	1.0
5	4.4	N.A.	N.A.			
7				5.0	6.0	1.0
8				N.A.	5.0	
9				3.0	5.0	2.0
10				4.0	5.0	1.0
12				4.0	6.0	2.0
13	5.3	6.4	1.1	4.0	5.0	1.0
14	5.0	6.4	1.4	2.0	3.0	1.0
15				4.0	4.0	.0
17				4.0	5.0	1.0
18				3.0	6.0	3.0
19				3.0	5.0	2.0
20	4.5	5.0	.5	N.A.	4.0	
21	4.8	6.2	1.4	4.0	5.0	1.0
			$\overline{X}$ = .9			$\overline{X}$ = 1.4
	Range		(.3 - 1.4)			(.0 - 3.0)

Table 4

Behavior Modification

Student	Behavior	Baseline	Termination Met Criteria	Probe 1	Probe 2
1	Throwing items	6 times a week	1/a week	1/week	1/week
2	Tardies,2 classes	50% on time	80%	90%	90%
3	Attendance	7% present/weekly average	100%	40%	100%
5	Attendance	40% present/weekly average	92%		
10	Loud Language	7 times per 10 min.	0/10 min.	0/10 min.	0/10 min.
12	Assignments	50%	80%		
13	Class tardies	47%	33%	33%	
15	Word Pronunciation Asking for Help	7 per 10 min.	0/10 min.	0/10 min.	1/10 min.
15	Pounding Table	5 per 10 min.	0/10 min.	1/10 min.	1/10 min.
17	Class tardies	50% on time	70%	moved	
18	Throwing items	3 times a week	0/week	0/week	1/week
19	Throwing items	5 times a week	1/week	2/week	1/week
20	Daily schedule, Needed help to remember	6 times a day	3/day	3/day	4/day
21	Verbal abuse,peers	3/10 min.	0/10 min.	group work discontinued	

4. To increase the amount of time the child will spend in the regular classroom.

Evaluation: A record will be kept showing the length of time the child has spent in the resource classroom and in the regular classroom.

Results: The 21 students in the program in 1976-77 were scheduled into the prescriptive classroom during the period or periods in which they were meeting the most failure as defined by test results in academic skills, the student, and the classroom teacher (e.g., an extremely low score in reading would result in having the student during the language arts class). Students were scheduled into the prescriptive classroom up to five periods a day in their total seven period schedule.

During the first year of the project, the maximum amount of periods a student was in the Title VI classroom was three periods for one student. Twenty-three students were scheduled for one period with five students scheduled for two periods for a total of 36 contact periods. During 1976-77, although the total number of students served was less, their disabilities necessitated more periods in the Prescriptive Classroom with one multiple handicapped student scheduled in for five periods a day. Seven students were scheduled for two periods, five students for three periods, and eight students for one period with a total of 44 contact periods. The students who had more htan tow periods did not receive individualized tutoring for more than two periods.

Whenever applicable, the student was considered enrolled in the regular classroom. Conferences were held with the prescriptive classroom teacher and grades were issued by the regular classroom teacher. Twenty-two classroom teachers had students from the Title VI classroom.

If students could be programmed back into the regular classroom or add a class to their schedule, the functioning level of the student at that time was determined. Through conferencing with the classroom teacher, the Title VI staff, the student, parents and counselors, the student would return to a classroom on a part time basis for a unit, full time basis, or add a new class to his schedule.*

Third Party Evaluator's Comments:

The 21 students who received service in this project demonstrated gains in academic areas and a reduction of devinat social behaviors. The mean gains in math were 1.7 years gain on the PIAT. In reading comprehension the gains were 1.4 years and .7 years in reading recognition. In word attack skills on the Woodcock Reading Test the mean gain was 2.1 years.

Related to the 21 behavior programs that were run, data were submitted to indicate a reduction or elimination of each behavior identified. The fact that the behaviors were probed twice after the initial criterion was met is also a positive aspect. However, it seems to this evaluator that more behavior management programs could have been run over an academic year.

Data submitted to demonstrate an increase in time spent in the regular classroom over the year showed that only three of the 21 did this. Perhaps, extenuating circumstances such as severe learning problems prohibited this from occurring.

In general, this project has met the objectives stated in their proposal.

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* An analysis of the data submitted was that three of twenty-one students were spending more time in the regular classroom at the end of the school year as compared with the amount of time spent upon entry to the Title VI Program.

Title of Project: Coos Regional Program for Hearing Impaired Students

Location of Project: Coos and Western Douglas Counties

Population Served: Hearing Impaired Students

9 Deaf Students
7 Hard of Hearing Students
50 Students receiving Indirect Instructional Services*
56 Students receiving Audiological Evaluation Services for a total of 80 attended appointments

Funding Allocated: Title VI Funds: $26,400

Local Tax Funds: $15,000

Project Beginning Date: August 15, 1976

Project Ending Date: June 15, 1977

Background and Rationale:

The Coos Regional Program for Hearing Impaired Students was established to meet the educational needs of the hearing impaired on a local basis. The purpose of this project was to improve the services available to hearing impaired children by providing: (1) a teacher of the deaf to teach 1/2 time in an itinerant position and 1/2 time in a resource classroom; (2) special instructional equipment for the resource classroom and for the itinerant program; and (3) audiological services on a regularly scheduled basis.

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* Indirect Instructional Services include: (1) Conferences with parents, teachers, or special services personnel; (2) follow through with hard of hearing students in regular classrooms who need special attention but do not require language and auditory training skills; and (3) follow-up on referrals from School and Public Health Nurses, Eugene Hearing and Speech Center, teachers and parents.

During the 1975-76 school year 18 hearing impaired students received assistance from two teachers of the deaf working in itinerant positions. One of these teachers was funded by a Title VI project, the other teacher was funded through resolution services of Coos County I.E.D. utilizing local taxes. At this time, 4 of the 18 students demonstrated a need for more services than could be given on a traveling teacher basis. The needs of these four students were then fully evaluated and recommendations were made for a 1/2 time hearing impaired resource class placement. Placing the more severely handicapped students in one location increased efficiency, allowing concentrated instruction for them and at the same time increased the itinerant teacher's time to work with integrated students.

As an aid to developing and expanding the language and auditory skills of the students, the following instructional equipment was purchased with Title VI funds: Project Life "PAL" System, a programmed language and reading series; a Language Master with instructor cards; a 16mm projector and screen; and individual study filmstrip projectors.

To insure maximum use of the students' residual hearing there was a need for the services of a part-time Audiologist. Provision was made for audiological services through cooperation with the Southern Oregon Regional Facility for the Deaf which included initial assessment, aural management and regular follow-up. This program greatly improved the students' use of appropriate amplification.

Methodology:

The staff consisted of two teachers of the hearing impaired and the services of an Audiologist approximately one day per month. The Title VI teacher worked 1/2 time in the itinerant program and 1/2 time as a resource classroom teacher. The second teacher was funded locally and worked full-time in the itinerant program. This program was administered by the Coos County I.E.D., however, the teachers worked cooperatively with personnel from the seven local school districts, the Public Health Department, the Children's Services Division, the Vocational Rehabilitation Division and other local agencies, as well as with Speech Clinicians and parents.

Sixteen hearing impaired students were served during the 1976-77 school year. The students participating in the itinerant program were seen from one hour to three hours per week depending on the child's age and need. The students seen in the resource Hearing Center received language, reading, math and auditory skill instruction 1/2 of each school day, with the remainder of the day spent in a regular classroom situation. (When the North Bend Schools closed for a month, this center was transferred to a church classroom which then became a self-contained, full-time program for that time period. Opportunity for field trips, within the community, and subsequent language experience stories were positive aspects of this small group instructional setting. Two high school students served as aides for four hours each day in the church classroom.)

Aides periodically volunteered to help the students. Two community college students each spent three hours a week for six weeks in the Hearing Center as aides. A reading tutor helped for ten weeks, 20 minutes daily per student. Another hearing impaired student was enrolled in May and a paid aide then assisted for five hours a day.

The hearing impaired students were mainstreamed into regular classrooms, and normally hearing children also attended language, math, and social studies lessons at the Hearing Center approximately 1 1/2 hours each day.

The aural-oral teaching approach was dependent upon accurate information regarding students' hearing and use of amplification. The soundproof testing room at the Coos County I.E.D. was the facility used by the Audiologist when conducting audiological evaluations. The Audiologist performed the following services: (1) initial and follow-up audiological evaluations; (2) interpretation of test results with parents and teachers; (3) specific recommendations for appropriate amplification; (4) care and maintenance of student's aids; (5) use and interpretation of information obtained from the hearing aid analyzer; and (6) communication with physicians, the Eugene Hearing and Speech Center, and the Public Health Department's Hearing Aid Program for Children.

Programming for the hearing impaired students consisted primarily in work on language skill activities and auditory training. Specific vocabulary and language were related to these subject areas: reading, math, social studies and science.

The following are examples of some of the programs and materials which the students used: the Apple Tree Language Program - a system of spiraling, sequential language instruction which began with a basic sentence structure of N + V + Adj.; the FOKES Program which reinforced the correct use of verb forms and complete sentences; the PAL Programmed Language/Reading series which required a student response after each frame of a filmstrip was presented; and use of the Language Master to present auditory information without visual cues.

Objectives:

1. The hearing impaired child will expand his receptive and expressive language.

Evaluation: For selected students the System Fore Language Sequence will be used to maintain child progress throughout the year or a behavioral vocabulary checklist will be used. Data will be reported as to the extent of sequence completion achieved by the children on the System Fore Sequence or on the number of new vocabulary words learned as measured by the behavioral checklist.

Results: The gains made by those students using the Language Sequence of System Fore are shown in Table 1. The gains made by those students using behavioral vocabulary checklists are shown in Table 2. (The Language Sequence of System Fore presents instructional objectives arranged according to child developmental levels from birth to about 10 years of age. For those hearing impaired students whose skills did not fall within this developmental range, individual behavioral vocabulary checklists were developed.

Scores given in Table 1 are presented in skill level units. A score of approximately 80% for each level is considered passing.

Scores given in Table 2 are written with the number of words acquired before the total number of words selected.

The teachers of the hearing impaired students selected vocabulary words needed for the students to complete individual and class assignments. A pretest was given and the unknown words were then placed on individual checklists. Data shown in Table 2, therefore, have a baseline of 0%. Students were given credit for words known (pretest) or acquired, after they used the words correctly and/or after they gave verbal definitions of the words as they were used in their original context.

Each of the students in the program received an identifying number. These numbers correspond to those used in the data reported in Impact 8, 9

Table 1

System Fore Language Inventory

Student	Level	2	3	4	5	6	7	8	9	10	11	12	13	X̄ Gain
3	Pre					83	88	88	73	87				10%
	Post					100	88	96	100	87				
	Diff					17	0	8	27	0				
4	Pre										82	67	76	21%
	Post										100	96	92	
	Diff										18	29	16	
6	Pre	82	41	50	67	83	65							22%
	Post	100	88	94	83	92	65							
	Diff	18	47	44	16	9	0							
12	Pre						53	79	42					19%
	Post						97	92	42					
	Diff						44	13	0					
17	Pre		85	71	83	77								19%
	Post		100	100	100	90								
	Diff		15	29	17	13								

$\overline{X}$ = 18%

All scores are shown as percentages. Scores were computed by adding the total number of tasks correct in each level and dividing that figure by the total number of tasks tested in each level.

Table 2

Receptive and Expressive Language Vocabulary Checklists

Student	Vocabulary Words	% of Words Acquired
1	24/24	100%
5	23/30	77%
9	16/20	80%
10	40/47	85%
18	93/93	100%
19	128/131	98%
20	19/30	63%

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and 10. During the school years 1973-77 a total of twenty-one students have been reported. The following student numbers will not be shown in data collected in Objectives 1, 2 and/or 3 for the following reasons:

Students #2 and #7 graduated from high school June, 1976.

Students #8 and #21 were seen by a traveling teacher for tutorial help with specific assignments only.

Student #11 graduated from high school June, 1975.

Student #13 returned to the area in May, 1977, from another program. Temporary placement was made and re-evaluation procedures were begun.

Students #14 and #15 received indirect instructional services.

Student #16 transferred to another program.

2. With amplification, the child will improve his auditory discrimination of sounds and/or speech.

Evaluation: A teacher developed behavioral checklist of sounds for auditory discrimination training will be developed and used. Specific children who are identified as needing auditory discrimination training will be given training and their progress will be monitored and reported using the developed checklist.

Results: The scores in Table 3 are given with the number of correctly identified sounds and/or speech items before the total number of items selected.

Table 3

Auditory Discrimination Checklists

Student	Sounds and/or Speech Items	% of Items Acquired
1	14/14	100%
3	47/47	100%
4	15/15	100%
5	22/22	100%
6	41/41	100%
9	20/20	100%
12	34/38	89%
17	33/36	92%
18	10/11	91%
19	29/30	97%
20	23/32	72%

The teachers selected auditory discrimination tasks appropriate to the needs of individual students. These tasks included: (1) discrimination of environmental sounds; (2) identification of words, phrases, or sentences presented orally; and (3) identification of words and phrases presented on the language master taped cards.

When the students responded incorrectly after the auditory item was initially presented, that item was placed on an individual auditory discrimination checklist. Gains were recorded when the student identified the auditory signal presented by: (1) name; (2) picture; or (3) object.

3. Selected school age hearing impaired children will develop target skills for reading and mathematics.

Evaluation: The Language/Reading Program of Project Life will be used to establish baseline data for reading. Selected parts of the mathematics sequences of System Fore will be used to establish baseline data for mathematics. Ongoing data and the gains made by selected hearing impaired children will be collected and reported.

Results: Students 3 and 6 participated in the Language/Reading Program of Project Life. Student #3 began with Level I, Set 1, and completed the programs of Level II, Set 12. Eighty-four programmed response filmstrips were viewed by this student, with an 80% correct criterion as the prerequisite for advancing to the next filmstrip. Student #6 also began with Level I, Set 1, and completed the programs of Level I, Set 8. Fifty-five programmed response filmstrips were viewed by this student with an 80% correct criterion as the prerequisite for proceeding to the following skill level.

Initial placement in this system was made after the students were pretested with filmstrips from various levels of the program. The content included introduction and repetition of vocabulary related to people, animals, food, clothing, shelter, and activities. Correct grammatical structures and sentence patterns were also presented.

Students #3 and #6 were tested on the Mathematics Sequence of System Fore. Student #3 was tested at Levels 5-18. Of 161 items on the pretest, 88 items were passed. Of 161 items on the posttest, 155 items were passed. This showed a gain of 41%. Student #6 was tested at Levels 3-13. Of 129 items on the pretest, 69 items were passed. Of 129 items on the posttest, 124 items were passed. This showed a gain of 43%. The skill areas included: simple geometry, measurement, numbers, numerals, operations and applications.

Third Party Evaluator's Comments:

This project has completed each of the objectives as specified in the letter of agreement and has completed a very precise and well narrated final report. This project is to be congratulated for performing both of these.

The ability of this project to provide to the hearing impaired clientele in Coos County the numerous special services with only two staff members is unique. The gains made by the students in this project appear to be quite good and the indirect instructional services provided by the staff had to be time consuming. This evaluator feels that this project is exemplary and recommends that others conducting or planning to start a similar program use this project as a guide.

Title of Project: Preschool for Multiply Handicapped
Location of Project: Coos County, Oregon
Population Served: 12 Preschool Handicapped Children, ages 4-5
Funding Allocated: $16,500
Project Beginning Date: August 15, 1976
Project Ending Date: June 15, 1977

Background and Rationale:

The value of early attention to the needs of handicapped children has been established. If opportunities for growth are not exploited in the early years, they are seriously curtailed or are forever lost. At least 12 handicapped children in Coos County between the ages of 4 and 5 years were in need of an instructional program.

This proposal envisioned the organization of a classroom for multiply handicapped preschool children between the ages of 4 and 5 years. The program was coordinated with a currently operating Parent Training program for the parents of handicapped children. Instructional methods and procedures recommended by Teaching Research in Monmouth have proved to be effective and were used in this class. A determined effort was made to coordinate home and school activities for the benefit of each child.

Methodology:

The project was designed so that each student would receive individualized instruction. This was accomplished through the use of volunteers including 5th and 6th graders from Blossom Gulch School, high school and college students, and adults. These volunteers went through a training program given by the teacher. They were allowed to work directly with the students after obtaining 90% on a test which covered essentials about data collection, handling various behaviors and how the programs were run.

Each student did an average of nine individualized programs per day. The remainder of the students' time was spent in group activities. In the play area structured play, appropriate social interaction and language was stressed. The staff used total communication (signing paired with verbalization) with all students to help establish a language base. Other activities included music, table time, library story time, group games, motor activities in the gym, toilet training, eating skills, Distar language, art activities, etc.

The staff also worked at keeping the parents informed of their child's progress. Whenever the student completed a program, a certificate specifying what the child had accomplished was sent home. Staff held conferences and sent home written reports three times during the year. The Parent Trainer worked closely with the families, also.

Because of the questions asked about the program, the staff put together a slide and tape presentation. It was shown at community organizations, other classes, PTA organizations and to anyone who was interested.

The multi-handicapped program was designed so that staff could monitor each student's progress daily and review completed programs to insure maintenance. The final evaluative instrument was the Preschool Student Progress Record administered on a pre- posttest basis.

Objectives:

1. Each student will have an individually designed program which will include the following skill areas: Motor development, social development, self-help, language and conceptual skills.

Evaluation: The Preschool Student Progress Record will be administered on a pre- posttest basis. Each student will also have a folder where the data on his daily programs and completed programs are kept. An ongoing continuous data collection system will be employed to measure progress for each child's programs.

Results: Individual programming was completed with 12 multi-handicapped children, ages 4-5. An average of nine individual programs were conducted daily per child. This represented approximately one in self-help, three in language, two in motor development, one in social and two in concepts. Since the programs were individualized, this represents only an average. (For example, if the child were severely physically handicapped, the number of motor programs would be increased.)

The 12 children completed 33 programs in self-help, 12 formal programs in social skills, 52 programs in motor skills, 77 in language, and 43 in the conceptual skill area. This represented 217 programs completed of the 276 programs conducted during the 1976-77 school year.

Table 1 shows the results of the pre and posttest administration of the Preschool Student Progress Record (PSPR). Data are reported on only five children since both pre- posttest socres were not available on the other seven. Total gains across the ten curriculum areas of the PSPR were 520, with average gains across these five students of 104 skills each.

Third Party Evaluator's Comments:

As demonstrated by the PSPR data reported by this project, it would appear that a very successful preschool program was conducted for handicapped children in Coos Bay. As prescribed in the letter of agreement for this project, individual programs were written for each child and progress was continuously monitored to assure success. Given this excellent classroom management strategy, the gains demonstrated by the PSPR scores is not surprising. If all classrooms employed similar strategies student achievement would be insured.

Table I

Results of the Pre- Posttest Administration of the Preschool Progress Record

	Social Skills		Receptive Language		Expressive Language		Toileting		Dressing		Eating		Gross Motor		Fine Motor		Concepts		
	Fall	Spr.	Fall	Spr.	Fall	Spr.	Fall	Spr.	Fall	Spr.	Fall	Spr.	Fall	Spr.	Fall	Spr.	Fall	Spr.	GAIN
1	14	19	13	41	27	59	1	1	1	11	18	26	25	33	13	20	3	21	116
2	10	16	7	32	4	29	1	5	3	8	9	24	29	33	12	19	0	14	105
3	13	21	10	42	13	44	0	7	3	16	21	27	33	37	15	23	0	32	141
4	18	25	34	48	16	58	6	7	15	22	22	29	36	42	25	30	31	86	110
5	4	14	4	11	3	9	1	1	4	9	15	25	31	33	14	20	5	7	48
Total																			520
Average																			$\overline{X}$=104

Title of Project: Coos Regional Program for the Visually Handicapped

Location of Project: Coos County, Oregon

Population Served: Visually Handicapped

Funding Allocated: $24,300

Project Beginning Date: August 15, 1976

Project Ending Date: June 15, 1977

Background and Rationale:

Eighteen visually handicapped children were found to reside in and near Coos County I.E.D. Four of these children were preschool for whom early treatment was essential. These students needed a full-time Specialist for home and school visits.

Due to the geographical isolation of Coos County, the Specialists from the Oregon School for the Blind were not able to service these visually handicapped children as regularly as they would like. This left a serious weakness in the instructional program offered to the handicapped students.

Establishment of a program for visually-impaired students predicted that other children with this handicap would present themselves.

The proposal included an itinerant teacher trained to teach visually handicapped students who could counsel with student aides, parents and teachers.

Methodology:

Eighteen visually impaired students from in and around Coos County were served by one full-time certified itinerant teacher of the blind and visually impaired.

Four students were taught daily, three were taught three times a week, and one was taught twice weekly in their public school classrooms.

One student was taught daily in his home, two students were provided materials on a weekly basis and the remaining seven students were provided with materials and consultive services monthly.

Objectives:

1. The student will improve or normalize deficit behaviors assessed (i.e., Braille reading, typing, mobility training, social and motor development).

Evaluation: A list of behaviors in which each child reached the criterion level of acceptable performance will be reported for each child.

Results: One student was assessed as needing to improve or normalize deficit behaviors in braille reading. Ten objectives were specified with improvement occurring in each. Below is a listing of those objectives with the number of months needed to complete each given.

a. Will correctly identify all shapes and lines in volumes 1, 2, and 3 of Touch and Tell pre-braille books (1 month).

b. Will correctly complete with 95% accuracy all shape worksheets given (1 month).

c. Will correctly complete with 95% accuracy all braille line worksheets given (3 months).

d. Will correctly identify with 95% accuracy all braille line letter worksheets given (6 months).

e. Will correctly identify with 95% accuracy all braille line word worksheets (6 months).

f. Will correctly identify with 95% accuracy all braille line word cards given (6 months).

g. Will correctly identify with 95% accuracy all braille word phrases worksheets given (9 months).

h. Will correctly identify with 95% accuracy all capitalization/punctuation worksheets given (9 months).

i. Will correctly identify with 95% accuracy the literary and nemeth code numbers 1-30 (9 months).

j. Will identify with 95% accuracy the lower part word signs ea, en, in, to (9 months).

k. Will identify with 95% accuracy the whole word signs out, and, for, of, the, and with (9 months).

2. Students will improve basic skills in academic subjects.

Evaluation: A list of behaviors in which each child reaches a criterion level of acceptable performance will be reported by each child.

Results: The itinerant teacher for the visually impaired served four children within this category during the 1976-77 school year. The students received academic instruction in socialization, language, self-help, cognitive, and motor skills. On an overall average, the students completed 9.25 programs. The breakdown per program is as follows:

	Programs Completed/Child
Socialization	.75
Language	4.25
Self-Help	.75
Cognitive	1.00
Motor	2.00

3. Locate and identify other target students.

Evaluation: Compile a list of students that were not identified at the beginning of the project.

Results: Eight new students were identified as visually impaired over the 1976-77 school year.

Third Party Evaluator's Comments:

Given the number of visually handicapped students in Coos County, and the distance these children were from the regional specialist in Salem, the use of Title VI-B funds to support this program was easily justified. Each objective agreed upon by the project was completed and in compliance with objective two. The evaluator did receive a list of objectives completed by each student.

This project is complimented for providing a needed service and providing it well.

Title of Project: Preschool Program for Children of Families with Special Needs

Location of Project: Pearl Buck Center, Eugene

Population Served: Families in the Eugene-Springfield Area with Retarded Parents

Funding Allocated: $45,000

Project Beginning Date: October 1, 1976

Project Ending Date: October 1, 1977

Background and Rationale:

It is well known that the children of retarded parents have a high risk of being identified as retarded themselves. While this may support the argument that the etiology of retardation is genetically based, there is contrary evidence that such children show a progressive decline in intelligence with increasing age. This suggests that the etiology of retarded development has a strong environmental component.

Very young children rely almost exclusively on the home environment for motor and conceptual stimulation and for general information about the world. It is not difficult to accept the premise that the intellectually impoverished environment provided by a retarded parent is a significant factor in accounting for a child's slow development.

Oregon has had no preschool programs that provide early intervention with families where the parents are retarded. This is a noticeable gap in services for the handicapped throughout the state. The long-range cost of such a program gap in both human and monetary terms may be immense. If even 50% of the children in such families can be kept out of special classes, a prevention project would pay for itself in school costs alone. When the costs of welfare support, vocational training, etc., that must be provided to retarded adults are considered, the long-range savings are likely to be great.

The prospect is that after completing the Preschool Program for Children of Families with Special Needs, the children will enter school with normal or above normal capacity to function successfully in the first grade. They could thus take part in regular classroom activities with the same degree of readiness that children from ordinary homes have, reaching adulthood with the skills that will make them contributing members of our society. Further, their self-image should be that of a person in the mainstream rather than that of an incompetent person who must reply on others to meet their basic needs.

Methodology:

While the major weakness addressed by the project was the lack of preschool services for the identified children, the general approach was multi-faceted. Evaluation of earlier intervention programs such as those conducted by Head Start has demonstrated that the most effective technique is one which combines preschool experiences for the children and training experiences for the parents. Furthermore, the need for both kinds of intervention was painfully evident at the time contact with these families was initiated. Their lack of ordinary child-rearing skills, their general social immaturity, and the low level of their intellectual functioning were reflected in the children in the form of language deficits, poor attention span, and turbulent social relations with other children of their age group.

Two principal modes of intervention were followed. First, a preschool setting for the children was provided where, through structured individual activities based on each child's needs and strong emphasis on appropriate group participation, readiness to participate in a public school setting would be developed. Second, the project staff worked directly with the parents both in the school setting and at home to increase their understanding of how children develop and to provide them with the skills necessary to interact appropriately with their own children.

Children's Programs. The children's program was conducted in a classroom at Pearl Buck Center. Transportation was provided to and from home. A wide variety of toys and instructional materials was available. The room had approximately 900 square feet available as well as immediate access to both covered and open play areas; these were considered to be a vital need in the total program since in some cases the inadequacies of the home setting was evident in the form of retarded motor development. The children were away from home from about 8 to 3:30, counting transportation time, but actually in school from 9 to 2:30. Over the year the enrollment varied between 10 and 12 children. During the course of the year four children were withdrawn, with new children enrolled as soon thereafter as possible. However, this meant that in some cases the length of intervention was undoubedly too short to have much impact.

Both individual and group aspects of development were stressed in the children's program. Each child's skill level was individually assessed and one-to-one instructional programs were set up to meet each one's needs by a teacher skilled in programmed instruction. The teacher's previous experience had been in individual instruction with emotionally disturbed and developmentally delayed children. Group activities were planned to enhance social skills among the youngsters and at the same time concentrate on the most common deficits uncovered by the individual assessments. Much time was spent giving the children needed experiences so that they could learn about the world around them. Field trips were scheduled to such places as fire stations, the zoo, a farm, the public library and other community settings.

Parent Program. The parent program consisted of three major components. First was a preliminary period of approximately 2 to 3 months devoted to establishing a firm rapport between parents and program personnel. Second, parents participated as aides in classroom activities. Third, parents were taught how to use consistent and effective techniques to obtain desired behaviors, with regard to both compliance and skill learning. Rapport was developed through a series of home visits and group social events and served to allay the natural suspicions many of these clients have toward figures of authority. (It is believed by the project's staff that perhaps the biggest payoff resulted from the fact that the parents eventually recognized that program personnel were genuinely interested in the welfare of their children.)

For the second and third components the parents came to school once a week on a regularly assigned day. They traveled to and from school with their children on the Pearl Buck busses. The mornings were generally spent in one-to-one skill instruction with a child usually chosen at random, although eventually they also worked regularly with their own children. The rest of the day was spent in the classroom participating in the regular routine, such as story telling, crafts, outdoor play, physical education and other similar activities. Opportunities were provided for the parents to observe skilled adult models interacting with their children. The implementation of individual instructional programs as well as participating in the less highly structured group activities in the classroom were guided and supervised by a psychologist with a background in child development and family relations. Programs to be conducted at home were restricted because personnel were not available to supervise home implementation.

Objectives:

1. To provide a prescriptive program for 12 four and five year olds and to maintain or improve their rates of development in at least 50% of the children.

Evaluation: A selected standardized pre- posttest(s) will be administered to each child and the results recorded and reported. Those gains made by each child on each individual prescriptive program will be recorded and reported.

Results: Since child enrollment in the program varied from 10-12 over the year, but only 10 children were in the program for a major portion of the funded period reported, results are based upon those 10 children with the longest attendance in the program. Over 90 different programs were used for individual instruction across the skill areas of math, reading, writing, language (receptive and expressive), self-help and personal/social. Table 1 presents the number of programs both completed and still ongoing at the time funding ceased for each of the ten children who participated for the full year. It should be noted that, contrary to what one might expect in a group of 4 and 5 year olds from ordinary households, the greatest number of programs completed was in the area of self-help skills. Programs for the development of receptive language skills were the second highest in frequency of completion.

Tables 2 and 3 present the results of pre- and posttests using two standardized intelligence tests, one emphasizing verbal skills (Stanford-Binet) and the other non-verbal skills (Leiter International Performance Scale). A comparison of the chronological and mental age differences, as measured by the Stanford-Binet (S-B), indicates that of the nine children for whom both pre- and posttest data were available eight maintained or exceeded a one-to-one monthly development compared to their chronological development. Of those eight children, considerable gains beyond chronological development were demonstrated by four children (numbers 2, 5, 6, and 8). A comparison of the chronological and age differences on the Leiter International Performance Scale (Leiter) indicates that of the eight children to whom the Leiter was administered, both pre and post, four children made sizable gains beyond the increased number of chronological months between testing, one child measured in mental age equivalent to his chronological development and three students made fewer month's gain in mental age than in chronological age. In addition, one child withdrew prior to posttest administration and the Leiter was not administered on a posttest basis to another child. Cumulatively, the S-B and Leiter test results suggest that the joint child-parent intervention programs were largely successful in maintaining and/or accelerating the mental development of the majority of the children in the program.

2. To train retarded parents of these children in appropriate child-rearing procedures, desirable modes of relating to their children, and the clear consistent use of cues and consequences.

Evaluation: A log for children and parents' attendance will be maintained and reported. An observation form will be developed and implemented for use in collecting data on parents in the areas of delivering cues and consequences appropriately while conducting programs.

Results: Table 4 summarizes the data from the attendance log for both parents and children. The data for children represent the total number of school days they attended the program. Parent data represent the number of weeks in which they were involved in either home visitation or classroom activities. Children ranged in total days of program attendance from 120 days (child #9) to 204 days (child #2). Parents ranged in weeks of program involvement from 4 to 24 weeks. The data in Table 4 are suggestive that there is a direct relationship between the frequency with which parents attended the weekly program and the regularity of daily attendance on the part of the children. In the case of Child 7, who is from a one-parent family, the father was reluctant to enroll his son or to initially participate himself so regular attendance did not commence until well after January 1977. Child 9 was withdrawn early in May when the family left the community. Children 8 and 10 who, when starting dates are taken into account, had the lowest daily attendance, came from homes where there was a good deal of disorganization of family life, as well as parents who are not highly motivated to help their children succeed academically.

Table 5 presents, parent by parent, the proportion of correct cues and consequences which each used during a one-to-one program designed to teach the children the names of coins. A general trend toward improved use of correct stimuli and reinforcers is evident in the data, both in the differences between the training and testing periods and in the changes that occurred from week to week. On the whole those parents who were interested in the procedure learned the requirements very quickly and appeared to recall them efficiently a week or more later. The parents also learned to keep data while administering this program. Examples of other programs which the parents administered during the year were two in the quantitative skills area: more/less and most/least; and, in the area of socialization, answers to the requests: tell me your first name, tell me your last name, and tell me your whole name.

Finally, it should be mentioned that five children (#1, 2, 4, 5 and 10) have been placed in first grade classrooms in public schools. On the basis of the project's contact with school personnel thus far, it appears that those children are in a much better position to remain in the mainstream during their school careers than they were a year ago. Even child #9, who was the oldest child in the group, made the least progress, and comes from a home where the parents are the least motivated, possessed some of the basic academic and several skills first grade teachers expect in their new students.

Third Party Evaluator's Comments:

As evidenced by the program's two objectives, the Preschool Program for Children of Families with Special Needs had two related, but separate purposes. First, to facilitate preschool children's skills and mental development. The second intent was training retarded parents to use effective cues and consequences when administering an academic program to a child in hopes that the acquired interaction skills during instruction would carry over into family activities.

The data collected, submitted to the third party evaluator and included in this report indicate that the project was largely successful in producing the projected changes in the children of and retarded parents. The standardized data from the Stanford-Binet (S-B) and the Leiter International Performance Scale (Leiter) revealed that the pre- posttest mental age gains exceeded the chronological age spans in which those gains were realized. However, as specified in the agreed upon evaluation strategies and discussed in the evaluator's on-site visits of the project, the project was to have reported individual program data for the children enrolled in the project. Unfortunately, the final results of those instructional data were not provided for inclusion in the project's final report. Those data, however, were collected and previewed by the evaluator during the site visits. While the availability of data were unquestionably valuable to the classroom personnel, inclusion of those data in the final report would undoubtedly have indicated numerous specific skill gains that are difficult to measure in standardized instruments such as the S-B or Leiter.

Programs that attempt to involve parents in the instructional process of their children, or to alter the home environment along dimensions believed to foster academic and other skill acquisition, frequently experience frustration in the inability to generate total parent interest, often in parents of children who appear to need it most. The current project was, further, complicated by the fact that parents chosen for potential involvement had themselves been previously identified as retarded. Although at least one other program of national exposure has attempted this approach to preventing retardation in children, that program was able to place far more demands and favorable conditions on its parents. Despite the current project's limitations for making parental involvement as lucrative for parents, it was successful in generating parental involvement across the majority of children in the program. Further, the parent observation data indicated that those parents improved their methods of presenting appropriate cues (attentional and instructional) and consequences. The generality of this observation across the total parent-child and other home interactions is yet speculative, with research literature suggesting that to achieve such cross-environment/cross-task generalization, generalization training must also be included. However, in relationship to the stated objectives and the subsequent data collected, analyzed and reported the current project must be considered to have succeeded in achieving project and funded intentions.

Table 1
Programs Completed and On-Going Across Seven Skill Areas

Child	MATH (10)[1]		READING (17)[1]		WRITING (6)[1]		EXPR LANG (6)[1]		REC LANG (20)[1]		SELF-HELP (32)[1]		PERSONAL/ SOCIAL (5)[1]		TOTAL PROGRAMS	
	Comp	On-Go	Comp	On-Go	Comp	On-Go	Comp	On-Go	Comp	On-Go	Comp	On-Go	Comp	On-Go	Comp	On-Go
1	3	7	12	5	3	3	1	3	14	6	31	-	5	-	69	24
2	7	3	12	5	3	3	-	-	15	5	31	-	5	-	73	16
3	-	2	1	4	-	2	2	4	2	3	13	3	4	1	22	19
4	3	7	12	5	2	4	-	-	15	5	26	5	1	4	59	30
5	7	3	12	5	3	3	-	-	15	5	30	1	5	-	72	17
6	5	5	10	7	3	3	-	-	10	10	28	3	3	2	59	30
7	-	2	3	4	-	2	2	4	6	3	13	3	4	1	28	19
8	2	8	8	9	3	3	-	-	10	10	28	3	4	1	55	34
9	5	5	9	8	4	2	-	-	10	10	30	1	3	2	61	28
10	2	8	6	11	3	3	2	3	10	10	29	2	4	1	56	38
Totals	34	50	85	63	24	28	7	14	107	67	259	21	38	12	554	255

Note: [1] Total programs run.

Table 2

Pretest and Posttest
Results from Stanford-Binet
Testing

Child	Chronological Age			Mental Age			Intelligence Quotient		
	Pre[1]	Post[1]	Diff.[2]	Pre[1]	Post[1]	Diff.[2]	Pre	Post	Diff.
1	5-6	6-3	+9	4-7	5-4	+9	81	84	+3
2[3]	5-4	6-4	+12	5-8	7-2	+17	107	114	+7
3[3]	4-1	5-1	+12	2-1	3-2	+13	50	58	+8
4	5-0	6-1	+11	4-10	6-10	+12	96	114	+18
5	5-8	6-6	+10	5-2	6-10	+20	90	105	+15
6	4-7	5-7	+12	4-7	5-11	+16	100	107	+7
7	3-10	4-10	+12	2-10	3-11	+13	71	79	+8
8	4-0	5-2	+14	3-2	4-9	+19	78	91	+13
9	5-1	withdrew		4-7	withdrew		89	withdrew	
10	5-10	6-9	+11	4-7	5-5	+10	76	78	+2

Notes: [1] Figures in years-months.

[2] Figures represent months of increase from pre to posttesting.

[3] Child 2 and 3 were siblings.

Table 3

Pretest and Posttest Results
From the Leiter International Performance
Scale

Child	Chronological Age			Mental Age			Intelligence Quotient		
	Pre[1]	Post[1]	Diff.[2]	Pre[1]	Post[1]	Diff.[2]	Pre	Post	Diff.
1	5-8	6-3	+7	4-9	6-9	+12	82	109	+27
2[3]	5-4	6-3	+11	5-4	7-0	+20	100	113	+13
3[3]	---[4]	5-1	---[4]	---[4]	4-0	---[4]	---[4]	76	---[4]
4	5-0	6-1	+13	4-9	5-6	+9	94	90	-4
5	5-8	6-7	+11	5-3	5-9	+6	92	87	-5
6	4-7	5-7	+12	4-9	5-3	+6	98	93	-5
7	---[4]	4-10	---[4]	---[4]	3-6	---[4]	---[4]	70	---[4]
8	4-3	5-3	+12	3-9	4-9	+12	85	89	+4
9	5-1	withdrew		3-9	withdrew		71	withdrew	
10	6-11	not given		5-6	not given		92	not given	

Notes:

[1] Figures are in years-months.

[2] Figures represent months of increase from pre to posttesting.

[3] Child 2 and 3 were siblings.

[4] Child was untestable at time of pretest.

Table 4

Frequency of Attendance of Parents and Children

	Child-Parent Pairs									
	1	2[1]	3[1]	4	5	6	7	8	9	10
Child (days)[2]	143 (began 11/29)	204	193	189	198	196.5	149	164	120	157.5
Parent (weeks)[3]	20	22	22	22	20	24	16	8	6	4

Notes:

[1] Child 2 and 3 were siblings.

[2] Total school days in which a child attended the program.

[3] Total weeks in which parents were involved in either home visitations or classroom activities.

Table 5
Proportion of Correct Cues and Consequences Presented by Parents During Individualized Programmed Instruction

		SESSION														
		1			2			3			4			5		
PARENT	PROGRAM	A	C	K	A	C	K	A	C	K	A	C	K	A	C	K
	Coin Ident 1¢/5¢/10¢															
1	Train	0	0	.13	.20	.20	.80	1.00	1.00	[illegible]	0	1.00	.86	.60	1.00	.80
	Test	.40	.96	.83	.80	.86	.66	1.00	1.00	.93	.10	1.00	.46	.70	.96	.90
	Gain	+.40	+.96	+.70	+.60	+.66	-.14	0	0	+.13	+.10	0	-.40	+.10	-.04	+.10
2	Train		ƀ		0	.20	1.00	0	0	.93	.20	1.00	.65		ƀ	
	Test				.10	.40	1.00	0	.23	.96	.10	.82	.52			
	Gain				+.10	+.20	0	0	+.23	+.03	-.10	-.18	-.13			
3	Train		ƀ		0	.07	.40	.20	.40	.47	.40	.93	.87	.20	1.00	.95
	Test				.10	.80	.43	.20	.67	.57	.30	1.00	.87	.20	.95	.95
	Gain				+.10	+.73	+.03	0	+.13	+.10	-.10	+.07	0	0	-.05	0
4	Train	0	.86	.60		ƀ		0	.66	.80	.40	.80	.87		ƀ	
	Test	.10	.90	.93				.30	1.00	.83	.70	1.00	.93			
	Gain	+.10	+.04	+.33				+.30	+.44	+.03	+.30	+.20	+.06			
5	Train	0	.06	.73	.13	1.00	1.00	.40	.26	1.00		ƀ		0	0	1.00
	Test	.30	.67	.76	.20	1.00	.93	.40	.90	1.00				.90	.90	.86
	Gain	+.30	+.61	+.03	+.07	0	-.07	0	+.64	0				+.90	+.90	-.14
6	Train		ƀ			ƀ			ƀ		1.00	1.00	.46	.40	.13	.26
	Test										.93	1.00	.03	0	.50	.60
	Gain										-.07	0	-.43	-.40	+.37	+.34
7	Train	.40	.20	.60	.40	0	1.00		ƀ		.46	.20	.60		ƀ	
	Test	.40	.30	.67	.10	.93	.86				.20	.95	.92			
	Gain	0	+.10	+.07	-.30	+.93	-.14				-.26	+.75	+.32			
8	Train		ƀ		0	.40	.60		ƀ		0	.46	1.00		ƀ	
	Test				0	.82	.80				.20	1.00	.90			
	Gain				0	+.42	+.20				+.20	+.54	-.10			
9	Train		ƀ			ƀ		0	0	.10		ƀ			ƀ	
	Test							.30	.95	1.00						
	Gain							+.30	+.95	+.90						

Key: A - Attentional Cues C - Instructional Cues K - Consequences ƀ - Absent

Table 5 (Continued)

		SESSION														
		6			7			8			9			10		
PARENT	PROGRAM	A	C	K	A	C	K	A	C	K	A	C	K	A	C	K
	Coin Ident 1¢/5¢/10¢															
1	Train	ƀ			ƀ			1.00	.93	.53	1.00	1.00	.86	.60	1.00	.93
	Test							.86	1.00	.86	1.00	1.00	.80	.40	1.00	.56
	Gain							-.14	+.07	+.33	0	0	-.06	-.20		-.37
2	Train	.20	1.00	1.00	.20	1.00	1.00	.40	.86	.73	.20	1.00	1.00	.20	1.00	.14
	Test	.20	1.00	.87	0	1.00	1.00	0	.66	.71	.30	1.00	.98	0	1.00	.60
	Gain	0	0	-.13	-.20	0	0	-.40	-.20	.02	+.10	0	-.02	-.20	0	+.46
3	Train	ƀ			ƀ			0	.87	.87	.40	.27	.60	0	.27	.40
	Test							1.00	1.00	.87	.60	.90	.80	.40	.93	.83
	Gain							+1.00	+.13	0	+.20	+.63	+.20	+.40	+.66	+.43
4	Train	.80	.13	.80	.40	1.00	.66	ƀ			1.00	.80	.60	ƀ		
	Test	.80	.93	1.00	.60	1.00	1.00				1.00	1.00	1.00			
	Gain	0	+.80	+.20	+.20	0	+.34				0	+.20	+.40			
5	Train	1.00	0	1.00	ƀ			1.00	1.00	.73	1.00	.95	1.00	ƀ		
	Test	1.00	.90	1.00				1.00	.96	.90	1.00	1.00	1.00			
	Gain	0	+.90	0				0	-.04	+.17	0	+.05	0			
6	Train	.93	1.00	.20	1.00	1.00	.80	1.00	0	0	ƀ			0	0	0
	Test	1.00	1.00	.70	1.00	1.00	1.00	1.00	.30	0				.80	.23	.37
	Gain	+.07	0	+.50	0	0	+.20	0	+.30	0				+.80	+.23	+.37
7	Train	ƀ			.60	1.00	.46	.80	1.00	.95	ƀ			1.00	1.00	.93
	Test				0	1.00	.70	0	.90	.98				.53	1.00	.93
	Gain				-.60	0	+.34	-.80	-.10	+.02				-.47	0	0
8	Train	ƀ			.40	1.00	1.00	.40	.93	1.00	ƀ			ƀ		
	Test				.40	.93	.93	.20	1.00	.93						
	Gain				0	-.07	-.07	-.20	+.07	-.07						
9	Train	.80	.80	.51	ƀ			ƀ			ƀ			ƀ		
	Test	1.00	1.00	.95												
	Gain	+.20	+.20	+.44												

Key: A - Attentional Cues C - Instructional Cues K - Consequences ƀ - Absent

Title of Project: Mainstream: Accommodation Services for the Handicapped

Location of Project: Eugene Schools, District 4-J, Eugene

Population Served: 72 Handicapped Students

Funding Allocated: $25,000

Project Beginning Date: July 1, 1976

Project Ending Date: June 30, 1977

Background and Rationale:

This project was designed to identify, place, and maintain physically handicapped pupils in regular public school classrooms. The pupils served had a variety of educational backgrounds. Some had always been in public schools; others had moved, as much as six years ago, or were moving from a special facility to a regular school setting; and some needed placement changes into special classes in the public schools.

All of the children served needed an individual to function as their advocate. This individual would serve as their placement adviser, and provide the pupils with special services and equipment so that adaptations could be made to the regular classroom setting and appropriate remediation could be planned as needed. These functions actually became the major responsibility of the facilitator hired for this project.

Some of the children served had major needs which included special transportation planning, provision and adaptation of equipment, consultation and training of the staffs who served them, and correction of architectural barriers. Other children had more minimal needs, and five needed no special service from the facilitator at the time of referral. It was felt, however, that the comfort level of the school staffs increased as they became aware that there was support personnel to help them meet the special needs of these pupils.

Methodology:

During the 1976-77 school year unserved physically handicapped children who could be mainstreamed were identified at the Easter Seal School and Crippled Children's Division clinics and from referrals made by public school staff. The project facilitator was involved in placement planning for all those children who would be school-aged during the project year, 1976-77, or the following year, 1977-78.

After pupils were identified in 1976-77 as potential candidates for mainstreaming into public schools, observations (with parents if possible) were made of several programs in which the child could be placed and a decision was made as to appropriate placement during the 1977-78 school year. Consultations and staffings occurred with the child's new teacher and pupil visitations or part time spring placements (1976-77 school year) were planned.

An Accommodation Committee was formed and its purpose was to help maintain handicapped pupils in regular public schools by making placement recommendations and by planning programs to meet their individual needs. The members of this committee included, the Director of Educational Services, Special Education Coordinator of the Eugene Public Schools, the Director of Health Services, the administrator of the Easter Seal School, a private school teacher, a public elementary school, a parent, and the project facilitator. These committee members met with school staffs on the basis of need, and at times, they served as advocates for children, assisting in the development of positive changes toward the placement of handicapped children in public schools.

During the project year, the facilitator provided services and equipment, as needed, to help maintain the pupil's placements. Aides and tutors were provided for those pupils who had special bathrooming and/or feeding needs or who had oral communication deficits as a result of their handicapping conditions. In most other instances, the pupils followed the regular school program. When needed, special accommodations were provided for academic programming.

Objectives:

1. To identify unserved physically handicapped students.

Evaluation: The number of unserved physically handicapped students will be reported.

Results: A total of four unserved children were identified. Three were preschoolers who were identified in clinics. The facilitator assisted in placements that included one child being placed in a Head Start program and two being placed in public school kindergartens. One of the kindergartens had a language orientation emphasis.

The other child was identified by a public school counselor and the facilitator's task was to determine if the child was being served and if the placement was appropriate. The child was being served in the deaf-blind program at the School for the Blind and the program was deemed appropriate.

2. To place physically handicapped students in regular classrooms.

Evaluation: The number of physically handicapped students placed in regular classes will be reported.

Results: The following provides a summary of the pupils placed.

(A) One severely involved, non-verbal cerebral palsied boy, who attended the Easter Seal School was placed half-day in regular classes in a public school junior high. An aide was hired to assist him in the public school setting.

(B) One cerebral palsied girl was transferred from the Child Center (for emotionally handicapped students) into an EMR class in a public school. An aide was hired to assist.

(C) One mildly involved cerebral palsied boy was transferred from an alternative class in a public school to an emotionally handicapped class in a public school.

(D) Two boys in regular classes in junior highs will move to high school programs next year. One of these boys will attend a high school that has EMR classes so that we can combine EMR classes and regular classes to develop an appropriate program to meet his needs.

(E) Seventeen students from the Easter Seal School building and Dunn Transitional Classroom were identified as potential candidates for mainstreaming. By using the Mainstreaming Plan that was developed by the facilitator in January, the following decisions were made in regard to these children:

(1) Six will enter regular classes in public schools in their communities.

(2) Three will enter regular classes in public schools in their community for half-day placements. They will continue to be served in a program for the physically handicapped for the other half day.

(3) Three will continue to be served in the physically handicapped program in a public school.

(4) Two will enter special classes in public schools (1 EMR, 1 TMR).

(5) Two will move from the Easter Seal School building to the physically handicapped program in a public school.

(6) One will remain in the Easter Seal School preschool program.

3. To maintain the placement of physically handicapped students in regular classrooms.

Evaluation: The number of children and the length of time maintained in regular classes will be reported. A statement from teachers who have physically handicapped children in their classes will be requested. The responses will be reported.

Results: A total of 58 handicapped students attended public schools. Thirty-three of these students had regular classroom placements. Of these 33, 32 were maintained in regular classrooms for the 1976-77 school year. The student who was not maintained in a regular classroom was transferred to an emotionally handicapped class in a public school. (He was maintained in a regular class from September through January during the 1976-77 school year.)

A questionnaire was sent to professional staff members and parents with whom the facilitator worked. Forty-one questionnaires were returned. Eight had inappropriate responses because they didn't respond specifically to the facilitator's services but instead responded to all special services provided by the district and other agencies. The remaining 33 responders provided the following responses:*

(A) Was the facilitator responsive to your needs? 30 Yes - 0 No

(B) Were adequate services provided by the facilitator? 29 Yes - 0 No

(C) Were your requests filled in a reasonable amount of time? 28 Yes - 0 No

(D) Were there any requests that were not filled? 0 Yes - 27 No

* All responders did not respond to every question.

The following provides a brief summary of the total impact of the project:

Seventy-two handicapped students referred for services:

58 from regular public schools
10 from special schools TOTAL = 72
4 pre- or post-school

48 from Eugene District 4J
16 from area outside district TOTAL = 72
8 from Easter Seal School

Handicapping conditions of students served:

35 Cerebral Palsy
8 Spina Bifida
3 Muscular Dystrophy
1 Osteogenesis Imperfecta
2 Trauma
6 Blind and/or Deaf
1 Chorea
1 Heart Disorder
1 Phocomelia
1 Neurological Disorganization
1 Stroke
1 Temporary
11 Other

Auxillary Staff:

Full time aide-attendants, for two students
Part time aide-attendants for seven students
Part time P.E. aides for two students
Part time P.T. consultant for one student
Part time tutor for one student
Volunteer for two students

Staffings, Clinics, Consultations:

5 Accommodation Committee Meetings
2 Crippled Children's Division Clinics
1-2 clinics per month at Easter Seal School
1 Direction Service staffing
3 Transition Meetings planned
4 Teacher/Therapist Meetings
Observations and Consultations conducted for 33 students
Phone consultations conducted for 11 out of town students
Staffings conducted for 12 students
School placement visits conducted for 10 students

Arrangements were made for the following services:

Transportation for 15 students
Physical Therapist consultation for 12 students
Occupational Therapist consultation for one student

Correction of architectural barriers for seven students
Psychological testing for five students
Adaptive P.E. consultations for nine students

Inservices conducted:

All day inservice for 60 professionals
Classroom inservices on handicapping conditions on three students

Equipment provided:

Wheelchair for one student
Cassette recorders and tapes for two students
Calculators for three students
Typewriters for four students
Wheelchair trays for two students
Potty chair for one student
Bus tokens for four students

Third Party Evaluator's Comments:

There can be no question that the project was successful in providing a variety of services required to allow physically handicapped children to function in regular classroom settings. From the description of the project it can be noted that not only were the educational needs of the children met through special assistance, but also a variety of other special needs were fulfilled by the project staff. This is deemed a necessity if handicapped children are to be served in regular classroom settings.

A further measure of the success of this project is reflected in the fact that the program is included in 1977-78 regional budget for the orthopedically handicapped. It is the opinion of this evaluator that this is one of the highest measures of success of a project.

Title of Project: Resource Consultant for the Emotionally Handicapped

Location of Project: Eugene School District 4-J, Eugene

Population Served: Elementary and Junior High students referred because of extreme behavior problems and elementary and junior high teachers

Funding Allocated: $42,000

Project Beginning Date: July 1, 1976

Project Ending Date: June 30, 1977

Background and Rationale:

The Eugene School District 4-J Program for Emotionally Handicapped (EH) students was established in 1971 and consisted of four elementary special classrooms and one junior high special classroom. The program served approximately 80 students per year (16 at the junior high level) with a maximum of 8 to 10 students enrolled in a classroom at any one time. These children were gradually moved back into their regular classrooms, as soon as they made the necessary behavior changes, leaving openings for other referred students to enter the EH classrooms.

During the 1975-76 school year, the new junior high classroom and one EH Resource Consultant were added. The consultant position was funded by a Title VI-B grant and was intended to provide supportive resource teacher services at the junior high level. These services were necessary for further strengthening the EH program. The services included: (1) Liaison between EH teachers and other school district personnel; (2) reintegration support services; (3) supplementary instructional materials for academic deficiencies of students in the regular classroom, and (4) behavior management training for regular classroom teachers to reduce and prevent the need for special EH placement of students. The resource consultant position was extremely successful. At the end of the 1975-76 school year, the decision was made to continue the program at the junior high level focusing particularly on the potential "drop-out". At that time an urgent need was identified at the elementary level for consultant services. Of special concern was the need to provide behavior management training to regular classroom teachers in order to keep EH students mainstreamed.

The goal of the Title VI-B grant for the school year 1976-77 was to provide for two resource consultants to work with teachers and students at both the elementary and junior high levels. These resource consultant positions further enhanced the 4J district policy of delivering services to identified students in the least restrictive settings possible.

Methodology:

The people selected as the resource consultants brought many valuable skills to the positions. One consultant's background included a doctorate in clinical psychology and work experience in a variety of positions, including several years on university faculties instructing potential teachers, one year as a research assistant on a social learning project, one year as a classroom teacher in a private school, and several experiences as a workshop leader on parent training skills. The other consultant's background included a masters in special education and work experiences which included 2 years of working with autistic children in a research classroom and 4½ years of working at a treatment center for seriously disturbed children as a teacher, family therapist and resource consultant. Both people operated with a theoretical framework of social learning theory, and together they brought a wide range of experiences to enrich the implementation of the program.

The consultant's office was located at the Opportunity Center, an alternative junior high. Because of scheduling problems, the consultants more frequently used the Educational Services Department as their base of operation. This location facilitated their interactions with the district's social workers and psychologists.

Each consultant served both junior highs and elementary schools in one half of the district (two regions). All referrals of students with behavior problems, or of teachers needing help with classroom management skills, were initiated by a school psychologist, counselor, principal, or social worker. The student's name, date of referral and referral source were given to the consultant covering the region. The consultant added the name to a list and processed it as soon as possible. The regular routine involved: (1) Contacting the referral source for a behavioral description of the student (including strengths and weaknesses, anecdotal information on academic performance, history of the problem, peer relationships, and medical status); (2) setting dates for observations in the classroom; (3) completing several classroom observations, and (4) holding a teacher conference to obtain additional information.

The next phase involved a decision as to the best approach to implementing behavior changes in the student or classroom. Several alternatives were available: (1) Planning and recommending a behavior change program to the school staff (counselor and/or teacher) -primary responsibility for implementation was then up to the school staff; (2) providing individual teachers with suggestions for reinforcing appropriate behaviors, ignoring inappropriate behaviors and making minor changes in classroom routines, presentation of materials, seating arrangements, etc.; (3) planning and recommending a behavior change program, with intensive involvement of the consultant in the implementation; (4) placement in the EH class for varied amounts of time; (5) implementing an intervention program for the entire class rather than for an individual child when the data indicated that such a system was the most effective approach or (6) terminating further consultant involvement when the data showed that no further intervention was needed.

After the decision as to which strategy would be the most appropriate for the referral, a staffing was held with the people involved. The consultant either remained regularly involved in the intervention, or attempted to make a follow-up contact to check on the progress of the intervention. When appropriate, the consultant also held a parent conference to explain the intervention and to set up a home reward system, if needed.

In addition to the specific school intervention, the consultants coordinated interventions with the school psychologists, social workers and community agencies such as private psychologists, Oregon Research Institute, Lane County Mental Health and the University of Oregon.

Objectives:

1. To change the behavior of identified EH children so that they behave appropriately in a regular classroom.

Evaluation: To report behavior rate data before and after program implementation for each child served.

Results: Activity 1 was to take observational data on referred children in regular classrooms and based upon the data, to design and implement programs for these children.

Initial observational data was gathered by the two consultants on 83 referred children in regular classrooms. This data included percentages of appropriate behavior for the referred student across a variety of times and settings as compared to percentages of appropriate behavior for the student's classmates during the same time blocks and settings. The data often included rates of pinpointed problem or positive behaviors for the referred student across times and settings as well.

Intervention programs following the initial observations took a variety of forms as follows:

Intensive individual programs: For 16 referred students, intensive programs involving individual behavior contracts were planned and implemented by the consultant and teacher/counselor.. These programs often had a home as well as a school component.

Data on the percentage of appropriate behavior engaged in by nine of the referred students and their peers indicated that before intervention targeted youngsters averaged 44% appropriate behaviors while their classmates averaged 83% during initial observation periods. After intervention the referred students averaged 82% appropriate behaviors and their classmates averaged 80%.

Thus the appropriate classroom behaviors of referred students increased an average of 38% over baseline in the regular classroom setting.

For 11 of these referred students data were gathered on the rate of specific problems plus positive behaviors as well.

Table 1 shows the change in rate for individual pinpointed behaviors before and after intervention.

Intensive programs for whole classes: The consultants implemented the CORBEH PASS program for 6 out-of-control classrooms. Each classroom contained at least one child who was referred for behavior problems. However, after taking observational data, the consultant and teacher decided that a program for the entire class would benefit the referred child, the peers, and the teacher as well.

TABLE 1

Changes in Rates of Pinpointed Behaviors for Referred EH Students Pre- and Post-Intervention

Student	Behavior	Pre-Intervention Rate	Post-Intervention Rate
	Deceleration Targets		
1	Out of Seat	.26 PM	.00 PM
2	Out of Seat	.80 PM	.10 PM
	Talk Outs	.80 PM	.10 PM
3	Talk Outs	.18 PM	.03 PM
4	Disruptive	.40 PM	.25 PM
5	Talk Outs	.44 PM	.00 PM
6	Disruptive	2.00 PM	.40 PM
	Acceleration Targets		
(1)	Math Problems Completed (20 min. time block)	.18 PM	2.80 PM
(2)	Volunteers in Class	.00 Per Day	1.60 Per Day
(3)	Completes Assignments (Reading and Math)	3.80 Per Day	6.80 Per Day
(4)	Completes Assignments (Reading and Math)	Never	Met expectations on 44 of 49 days Exceeded expectations on 25 days
(5)	Completes Spelling Assignments	Never	Met expections on 13 of 13 days

For the six classes participating in the PASS program the baseline data showed an average of 13% appropriate behaviors. After termination of the programs the classes averaged 75.5% appropriate behaviors. Thus the whole classes increased an average of 62.5% appropriate behaviors over their baseline performance.

Recommendations to the child's school or home: For 38 of the referred children for whom initial observational data were collected in the regular classrooms, the consultants made recommendations to the child's teacher and/or counselor and parents as to program changes or contracts that might assist the child. Because, in these cases the responsibility for implementing these changes fell more on people other than the consultant, the follow-up data are less stringent, often being in the form of anecdotal reports over the telephone. The remaining 23 referred children for whom initial observational data was gathered in the classroom fell into the category of "no further intervention in the regular classroom" for a variety of reasons, e.g., the family moved, the teacher/school wanted no further help, the child was placed in a special class.

Activity 2 was to consult with school personnel to make recommendations for procedures they might institute to change behaviors in the school and classroom.

In 25 cases the consultants conferred with school counselors, principals, and/or teachers about specific problems of children without having taken observational data on the child involved. These contacts often took the form of formal school staffings, but also included brief informal "information exchange" meetings.

Activity 3 was to coordinate intervention efforts with other schools and community professions in order to provide consistent programs. The two consultants were involved in at least one school staffing on nearly every child referred. More often than not, if an intervention plan was instituted, a follow-up staffing was included as well. When community professionals were working with a referred child or family, every effort was made to include them in the staff.

2. To change the behavior of identified teachers so that they can maintain the appropriate behavior of emotionally handicapped children in regular classrooms.

Evaluation: Behavior rate data before and after program implementation for each teacher and child served will be reported.

Results: Activity 1 was to take observational data on the behaviors of teachers of referred children. The initial observational data was taken on 51 teachers of referred students. In addition observational data was taken on six teachers who were having difficulties with their whole classrooms. Nine teachers were served on an intensive basis using before and after data collected on their rates of appropriate praise and inappropriate attention paid to students. The consultants used CORBEH's PASS Program as the intervention with six teachers. The rest were provided with individually designed programs.

PASS Teachers: The baseline data on the six teachers indicated an average praise rate of .22 per minute and rate of attention to inappropriate behaviors at .26. After the PASS Training Workshops, their rates of praise averaged 1.01 and the rates of negative attention averaged .09. The praise rate of these teachers as a group increased by .79 per minute. The negative interactions were decreased by .17 per minute.

Other Teachers: Baseline data on the other three teachers served was .22 per minute for praises and .19 per minute for negative interactions. After training by the consultants, praise rate was .78 per minute and negative interactions were .06 per minute.

Activity 2 was to give teacher feedback through individual teacher conferences. A second major type of teacher training involved the use of the initial observational data in individual teacher conferences. The resource consultants assisted teachers to plan interventions in the following areas: classroom organization and structure, scheduling, individualization of academic materials, handling peer problems, and dealing with other classroom problems. The consultants worked with 30 teachers in the above ways. Follow-up contacts were made and the data from Objective 1 indicate the success of these teacher conferences.

Activity 3 was to provide teacher inservice training. A four-hour teacher inservice was provided for a group of 8-10 teachers in one junior high. The focus of the inservice was on motivating the student who refused to work. Several teachers tried techniques discussed in the initial session; they received continued support and encouragement from the EH teacher in their building, and feedback from a follow-up inservice session as well.

3. To meet with interested parents for the purpose of explaining programs developed for their child.

Evaluation: The number of parent meetings will be reported.

Results: Activity 1 was to hold individual conferences with parents immediately after evaluation of the child's school behavior. The consultants met with the parents of 41 children for the purpose of describing and developing school interventions for their children.

Activity 2 was to identify and relay information on community resources available for further parent and family support. The consultants referred 22 families to various community services for more information and/or counseling.

Activity 3 was to have periodic meetings or telephone contacts with parents to exchange information on their child's progress. The consultants maintained periodic contact with the parents of 12 children. The goals of these contacts were to review and evaluate the progress of the school interventions and to coordinate home-school reinforcement systems.

4. To reintegrate children from the EH classroom who have learned to behave appropriately into regular classrooms.

Evaluation: The number of children placed in regular classes will be reported.

Results: Activity 1 was to participate in initial planning staffings prior to a child's placement in an EH class. The consultants participated in nine initial planning staffings prior to placing a child in an EH class.

Activity 2 was to assist the EH teacher in the establishment of individual goals, and the evaluation of each child's progress toward these goals. The resource consultants met with each EH teacher on a regular weekly or biweekly basis. During that time programs for individual children were planned and discussed and data were reviewed.

Activity 3 was to develop and institute a reintegration plan with the EH teacher and the regular classroom teacher for children who are ready to leave EH placement. The resource consultants participated in three staffings involving EH teachers and other school personnel to make plans for the gradual integration of children into regular classrooms.

Activity 4 was to provide ongoing support and observations to insure that appropriate behaviors are being maintained in the regular class. The gradual reintegration of students into regular classes was mostly monitored by the EH teachers or counselors. They gave support to outside teachers and also kept observational data on behaviors of EH students in their regular classes. In three cases, the resource consultant took follow-up observational data in the classroom. However, the resource consultants helped the EH teachers problem-solve situations with regular teachers on numerous occasions.

The feedback from individual schools was given to the Educational Services Director and indicated that the consultant approach in the district had a positive impact. Because of this feedback and the increased emphasis on mainstreaming special education students, the district included the two consultant positions in its regular budget when Title VI-B funds became unavailable. Given the district commitment to developing a consultant model, the two consultants devoted some time in Spring, 1977 to development of the model. These activities included both site visitations to other successful consultant programs in the state, and visitations by out-of-state special education consultants who provided in-service workshops.

Third Party Evaluator's Comments:

This project successfully met the objectives. This was the case in all instances. That the consultant model was effective is apparent from the data presented.

One of the highest degrees of success of a Title VI project is to have it assumed by the district as part of its regular program. This was the case with this project. The two consultants on the project were retained by the district with district funds. This vote of district confidence can only enhance the program that has been successfully started.

Title of Project: Education Evaluation Center

Location of Project: Curry County Gold Beach

Population Served: A total of 53 learning disabled students

Funding Allocated: $27,395

Project Beginning Date: September 1, 1976

Project Ending Date: June 15, 1977

Background and Rationale:

In the past the Curry County Intermediate Education District has attempted to provide an overall education program to meet the needs of handicapped children. By utilizing the services of various education specialists, all children identified as obviously handicapped were placed in appropriate programs. It was found, however, that there were more children with deficiencies in reading, spelling or arithmetic than the three teachers of extreme learning problems could manage. Thus many children were left waiting for services. Adequate diagnosis of severe learning disabilities was largely confined to agencies outside the county. There was a lack of realistic communication between the referral agency and the child's classroom teacher which typically led to educationally sound programs not being developed for the children.

The formation of a position of the psychoeducational diagnostician was created to help bridge the gap between the psychologist and the teacher. It was felt that people familiar with the school system would be able to diagnose children's learning disabilities and prescribe teaching materials and/or methods that could be utilized in the classroom. A large number of children with a learning disorder, it was hypothesized, could function in a regular classroom if the children and their teachers were given special assistance in overcoming and/or learning to work with the disability.

Methodology:

The project staff consisted of one psychoeducational diagnostician and one half-time evaluator. The services of the Intermediate Education District-employed speech therapists were used to assess speech, hearing and language. The evaluator was used to monitor the child's progress following the evaluation.

Referrals were made by the classroom teacher or parent through the building principal. When the referral reached the Center, the child's medical records were requested and the child was referred to the speech therapist for the speech, hearing and language assessment. The evaluation date was scheduled with the parents. The child was brought to the Center and psychological and academic tests were administered by the psychoeducational diagnostician and the evaluator. An initial interview and final conference with the parents were included on the evaluation day.

The diagnostic and prescriptive report was made to the school and parents in writing within ten days after the evaluation. It included the psychological climate, the etiology (if known), the child's preferred modality of learning, and suggestions and/or specific materials. The monthly follow-up procedure by the evaluator was begun after the teacher had received the evaluation report. The evaluator met with the teacher on a monthly basis to examine the progress of the child.

Posttesting was done in April and May. This posttesting included those children involved in the initial project year of 1975-76. A final conference was held with each teacher who was involved with the project.

A summary report which included pre- and posttesting scores was written on each participant and sent to the school and home.

Objectives:

1. Fifty children will be diagnosed during the 1976-77 school year and their learning disabilities pinpointed. Individual prescriptions will be written using a diagnostic approach. The Wide Range Achievement Test or the Gray Oral Reading Test plus the KeyMath Test will be used for pretests. The written prescription will be made no later than 10 school days after the evaluation.

Evaluation: A record of the number of referred learning disabled children evaluated and scheduled evaluations will be kept. Completed evaluations will be on file in the support services office. Each child will receive appropriate psychometric, educational, speech, hearing and language evaluation. The Wide Range Achievement Test and the KeyMath Test will be included in the educational evaluation. A written diagnosis with prescription on each child will be sent to the school and parents ten school days after the evaluation.

Results: A flow chart was used to record, by date, the number of referrals received. This showed when the referral was scheduled for evaluation and the date the student was evaluated. Fifty-three children were evaluated during this project period.

Psychometric and educational testing material (including the Wide Range Achievement Test and KeyMath Test), the speech, hearing and language evaluation reports from the speech therapists, medical reports, information from the parent interview and referral form, and observation at the Center and sometimes in the classroom setting were used to gather information for the Psychoeducational Diagnostician to write a diagnostic and prescriptive report. A copy of the evaluation report was sent to the parents and to the school.

All completed evaluations are on file at the Intermediate Education District Office in Gold Beach.

The written diagnostic and prescriptive report was made within ten school days after the evaluation. Further information was needed for some of the reports before they could be completed; thus a few reports were delayed in getting to the parents and school.

2. Monitoring of the students is arranged to record the progress or regression of the students.

Evaluation: A monthly staff meeting will involve at least 85% of the staff. All individual meetings will be recorded and the following information recorded: time, date of meeting, progress recorded by 85% of the staff.

Results: Each month the evaluator from the Center met with each of the 53 students' classroom teacher. A form was developed for recording monthly follow-up conferences. The form included the date and time of the meeting. The date of each follow-up conference was recorded on the flow chart next to the child's name. The monthly conference records were placed in the respective child's folder at the Center.

3. The progress of each child that has been evaluated shall be measured. This will include those children evaluated in the school district in the project year 1975-76.

Evaluation: The Wide Range Achievement Test or the Gray Oral Reading Test plus the KeyMath Test will be administered to measure the gains.

Results: In April and May, 48 children were evaluated in the Center during 1976-77 project years and were posttested using the Wide Range Achievement Test and the KeyMath Test. Five children were not posttested because they had moved from the area or posttesting was not applicable. A progress report stating the pre- and posttest scores was sent to the children's parents and to their schools. Figure 1 represents the average amount of remediation time and academic progress made by the children as measured by the pre- and posttests during the 1976-77 project year.

Third Party Evaluator's Comments:

This project completed all objectives and evaluation strategies required by the letter of agreement. The final report was on time, and the project staff deserve to be congratulated for performing all tasks as required.

A review by the project evaluator of consumer response forms indicated that district reactions to this program were favorable with many teacher requesting increasing the availability of the service. These responses seemed to indicate the school personnel were very appreciative of the diagnostic and prescriptive help provided by these project staff and the data, in fact, show that important gains in student performance were made.

This project appears to have made good use of public monies and the district was making plans for continuation of the service. This project is a good example of the benefit Title VI-B monies have done for special education in Oregon.

AVERAGE ACADEMIC PROGRESS MADE BY CHILDREN* EVALUATED BY THE EDUCATION EVALUATION CENTER FOR THE PROJECT YEAR 1976-77

*48 children

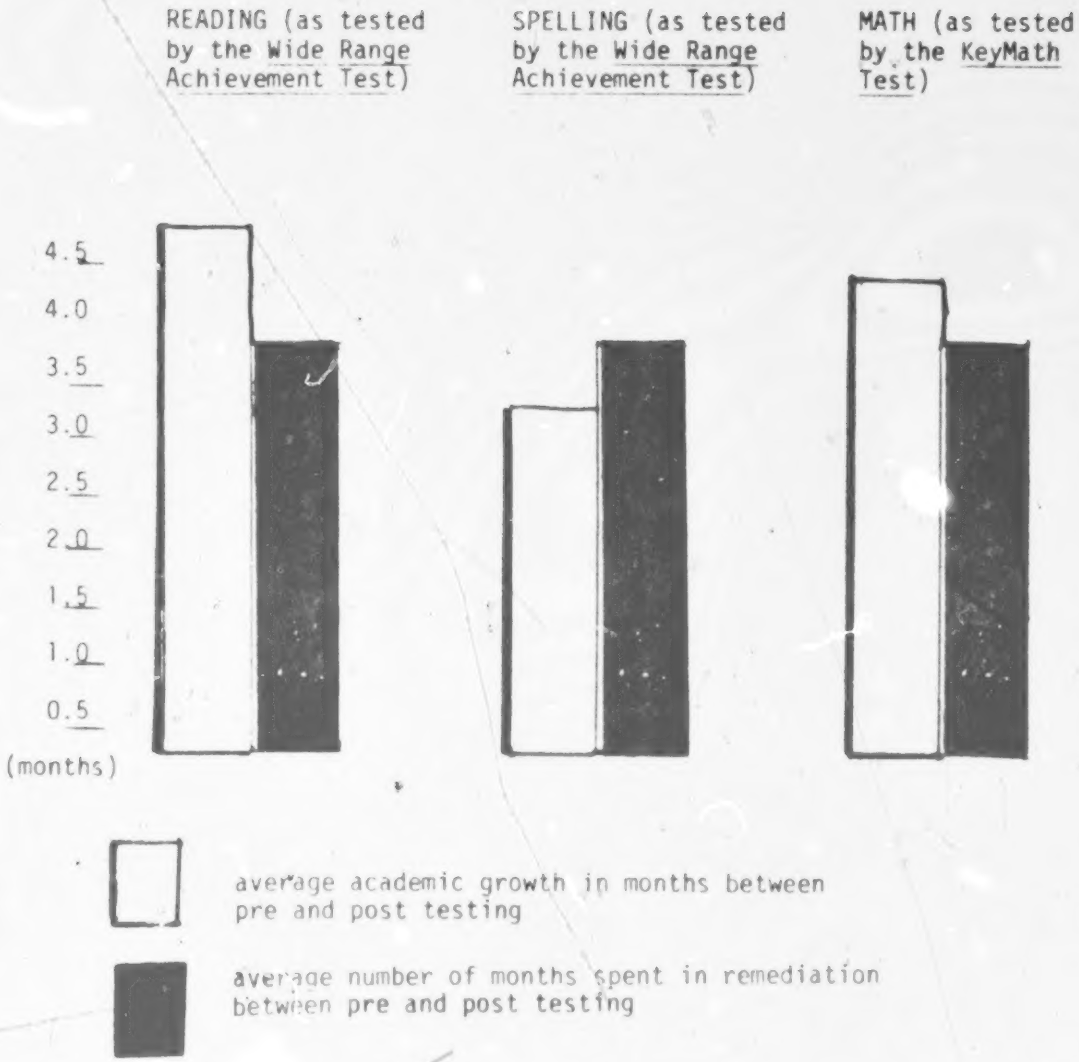

Figure I

Title of Project: Normalizing Education for the Handicapped

Location of the Project:
Central School District 13J
1610 Monmouth Street
Independence, Oregon

Population Served: (78)
- (15 target children)
- (5 follow-up children, 1974-76 projects)
- (22 ongoing involvement)
- (36 incidental services)

Funding Allocated: $24,386

Project Beginning Date: July 1, 1976

Project Ending Date: June 30, 1977

Background and Rationale:

This project was a continuation of a project begun during the 1974-75 school year and continued through 1975-76. The primary modification was the contracting with Oregon College of Education (OCE) for the half-time services of four certified, experienced teachers who were enrolled in the Handicapped Learner graduate program. An intern operated a morning classroom in each of the four elementary schools in the district. This allowed children to remain all day in their home school rather than bussing them to a central facility as had been done the first two years. It also facilitated daily consultation with and support for the regular classroom teachers who served the target students in the afternoon.

The project was designed "to enhance the educational progress of children who exhibit symptoms of emotional disturbance by focusing a wide range of activities on the causes of their emotional disturbance," and

a. to provide a process for greater parental involvement and to assist parents in effective interaction with their children.

b. to provide intensive and continuing training for those teachers who have emotionally disturbed children in their classrooms.

c. to provide a setting for screening, diagnosis, and initial prescriptive treatment of the emotionally disturbed child.

d. to provide consultant services to classroom teachers of identified students not served in the special classrooms.

e. to provide a process by which outside agencies may be utilized by the school to assist in these special education needs.

f. to demonstrate a model for normalizing the education of emotionally disturbed children.

g. to introduce a training program for prospective teachers of emotionally disturbed children which will be transferable to other schools.

Methodology:

Children were referred to the project by teachers in the four elementary schools who requested help ranging from a single classroom observation or teacher conference to extensive educational diagnosis or data collection in the classroom and/or the playground.

Before children were admitted to the project morning classroom, an agreement designating the particular behaviors of concern, the criteria for re-entry full time in the regular classroom, and the extent of the teacher's participation in conferences and conducting behavioral programs was contracted. Parents were contacted to gain consent for their child's participation and their commitment to participate in conferences and/or parenting classes.

The project classrooms were highly structured, using token economies to support a diagnostic-prescriptive educational program. Free time for points earned was the reinforcer. Points were also given for the return of the daily point cards with a parent's signature. This allowed the child to accept some responsibility for facilitating daily communication between school and home. Parents agreed to reinforce with verbal praise and participation with their child in specified activities.

The counseling component included individual and group meetings incorporating the guidelines of Dreijurs, Glasser, and Ellis's Rational Emotive Education.

The interns maintained frequent contact with the parents of the target students and the resource teacher-coordinator offered two parenting classes using Dinkmeyer's Systematic Training for Effective Parenting. The excellent materials and including parents of children with less serious problems in the groups seemed to provide for more effective and enthusiastic parent participation.

Objectives:

1. To increase the skills of selected children in the areas of reading and math.

Evaluation: Key Math will be administered on a pretest basis within 30 days of the child's entry into the program. The posttest will be given to the child no later than the month of May, 1977 or when the child leaves the program. The Woodcock Reading Mastery (Subtests) will be administered on a pre- posttest basis. This reading pretest will be administered 30 days after the entry of the child into the program and when the child leaves the program or no later than May, 1977.

Results: Table 1 shows the grade equivalent scores achieved on the pre- and post- administrations of the Woodcock Reading Mastery (Word Identification and Passage Comprehension subtests) and the Key Math Diagnostic Arithmetic Test. All students in the morning program showed an increase in academic skills with the exception of student N who showed a loss in the ability to comprehend a reading passage when the posttest was administered.

2. To reduce or eliminate socially deviant behavior of selected children.

Table 1

Academic Achievement Test Scores

Student	Date entered program	Duration/ months	Woodcock Reading Mastery Pre-test	Woodcock Reading Mastery Post-test	Woodcock Reading Mastery gain	Key Math Diagnostic Pre-test	Key Math Diagnostic Post-test	Key Math Diagnostic gain
A	12/7	2	1.8 2.2	2.6 2.4	.8 .2	2.0	2.9	.9
B	12/15	7½	1.8 2.0	2.6 2.9	.8 .9	4.3	5.8	1.5
C	1/27	4	1.4 1.5	1.7 2.1	.3 .7	2.0	2.9	.9
D	10/10	7½	2.3 2.1	3.5 4.3	1.2 2.2	3.7	5.9	2.2
***E	10/14	2½	2.2	*	*	2.7	*	*
F	10/14	2½	2.5	*	*	3.5	*	*
G	10/13	8	2.5	4.1	1.6	4.0	6.3	2.3
H	1/25	5	2.7	3.9	1.2	**	4.9	**
I	10/13	8	2.7	4.3	1.6	3.3	5.0	1.7
****J	10/18	3/4	1.9 2.0	2.5 2.4	.6 .4	1.6	2.1	.5
K	10/14	5	4.7 4.5	8.3 6.2	3.6 1.7	3.8	5.1	1.3
L	10/7	8	1.5 1.8	2.2 2.3	.7 .5	1.6	2.7	1.1
M	11/10	7	4.4 3.1	8.3 4.9	4.1 1.8	1.7	3.1	1.4
N	4/1	2	1.9 2.3	2.1 2.2	.2 -.1	2.5	2.6	.1
O	4/18	1½	6.2 6.7	7.8 8.4	1.6 1.7	5.8	6.2	.4

* Student left the district unexpectedly; no posttesting done.

** Pretest was lost.

*** Mean of Word Identification and Passage Comprehension scores on students E through I.

**** Student transferred to an EMR class; posttest given at the end of the year.

Evaluation: The behavior will be pinpointed, baseline data will be collected, a prescriptive program will be designed and implemented, interim data will be collected, and programming will be continued until criterion level of acceptable performance is attained.

Results: Table 2 gives the T scores on pre- and post- Walker Problem Behavior Identification checklists completed by the classroom teachers. When the total raw scores of the pre- and post- checklists were compared, it became apparent that the teachers felt that all students except B, C, D and N had improved.

Table 3 shows the duration of attendance in the morning program, the percent of on-task behaviors and the disposition of each student served. The mean on-task behavior showed a baseline of 40.2% prior to admittance to the program, 64.5% in the morning classroom, and 69.4% in the regular classroom the last two weeks of school. All students except A, B, C, D and N showed on-task behavior at least 81% of the time when post-data was being taken in the regular classroom.

Contracts defining the behaviors to be changed, baseline data and the criterion level for re-entry full time to the regular classroom were written. The following are examples in addition to on-task behavior:

Student C	Baseline	Criterion	Post-Data
1. Negative physical contact with peers at noon recess.	5/recess	0/recess	0/recess
2. Teacher defiance at noon recess.	2/week	0/week	0/week
Student F			
1. Swearing in class.	8/20 min.	0/20 min.	0/20 min.
2. Talk outs in class.	10/20 min.	0/20 min.	0/20 min.
Student G			
1. Talk outs in class.	6/20 min.	0/20 min.	0/20 min.
2. Returning daily card with afternoon teachers' signature.	0/5 days	4/5 days	5/5 days

Table 2

Walker Problem Behavior Identification Checklist
(Teacher Rating Scale)
T Scores

Student	Acting Out	Withdrawal	Distract-ability	Disturbed Peer Relations	Immaturity
*A pre-	99	--	75	78	69
post-					
**B pre-	70	63	53	56	69
post-	78	54	64	56	69
C pre-	89	57	60	--	69
post-	81	69	51	--	66
D pre-	82	--	75	60	79
post-	80	--	72	63	86
*E pre-	57	85	63	56	95
post-					
*F pre-	90	--	75	56	69
post-					
G pre-	89	--	72	84	--
post-	48	--	47	56	--
H pre-	83	--	72	--	59
post-	74	--	64	--	66
I pre-	99	63	78	84	79
post-	50	--	56	56	--
**J pre-	76	57	69	91	71
post-	67	45	63	84	71
K pre-	68	57	69	74	45
post-	55	44	46	83	45
L pre-	53	45	75	45	45
post-	53	45	43	45	51
M pre-	89	57	63	45	86
post-	67	45	45	45	45
N pre-	53	--	69	--	61
post-	65	--	69	--	--
***O pre-					
post-	50	66	43	56	--

* Child left the district unexpectedly, no post- checklist.
** Pre- and post- checklists completed by different teachers.
*** Child placed in special program when enrolled in this school, no pre- checklist.

Table 3

Percentage On-Task Behavior
Morning & Regular Classroom

Student	Time in a.m. room		% On-task Behavior					Disposition
	Date Entered	Months in a.m. room	Baseline-Reg. class	Post-data a.m. room	Difference-a.m. room	Post-data-Reg. class	Difference-Reg. class	
A	10/6	2	15.3	35	+19.7	31.6	+18.3	moved out of the district
B	10/15	7½	43	75	+32	29	-14	follow-up in regular classroom
C	1/27	4	24.1	28	+3.9	65	+40.9	follow-up in regular classroom
D	10/10	7½	41.3	36	-5.3	33	-8.3	follow-up in regular classroom
E	10/14	2½	42	57	+15	--	---	moved out of the district
F	10/14	2½	53	61	+8	--	---	moved out of the district
G	10/13	8	32.2	79	+46.8	81.1	+48.9	full time in regular classroom
H	1/25	5	53	84.5	+31.5	81	+28	full time in regular classroom
I	10/13	8	43.3	80	+36.7	84	+40.7	full time in regular classroom
J	10/16	3/4	27.5					transferred to an EMR classroom
K	10/14	5	59	80	+21	93	+34	full time in regular classroom
L	10/7	8	48	60	+12	85	+37	follow-up in regular classroom
M	11/10	7	56	65	+9	91	+35	follow-up in regular classroom
N	4/1	2	25	70	+45	74	+49	moving - recommend structured classroom
O	4/18	1½	--	90	---	85	---	full time in regular classroom

Student H	Baseline	Criterion	Post-Data
1. Refusal to follow teacher's directions.	5/day	0/day	0/day
Student I			
1. Out of seat.	19/20 min.	7/20 min.	4/20 min.
2. Talk outs in class.	4/20 min.	0/20 min.	0/20 min.
3. Returning daily card with afternoon teacher's signature.	0/5 days	4/5 days	5/5 days
Student K			
1. Teasing peers in classroom.	.83/20 min.	0/20 min.	0/20 min.
2. Yelling out in class.	.83/20 min.	0/20 min.	0/20 min.

Most of these programs were carried out by the regular classroom teachers or playground aides.

3. To increase the amount of time each child is enrolled in the regular classroom.

Evaluation: The mean number of hours spent by each child in the learning support center and the regular classroom will be recorded and reported.

Results: Table 4 shows the average amount of time students spent in the morning class. The mean of the first three months is compared with the mean of the last three months of school for each student. Students B, G, H and I followed a well-defined transition program toward full time attendance in the regular classroom during May. Students N and O entered the program the last two months of school. This objective was not attained with the other students.

Third Party Evaluator's Comments:

In reviewing the data submitted for objective 1 it becomes apparent that the students made excellent academic gains during the project year. Eight of the 15 students exceeded a one year gain in results of the posttest for the Woodcock Reading Mastery. Five of the remaining seven students taking the test made adequate gains.

Table 4

Average Weekly Contact Hours
Morning Classroom

Student	Months in a.m. class	Average Number of Hours Served Weekly		Comments
		First three months	Last three months	
A	2	12.5	- -	left district
B	7½	12.5	5	
C	4	12.5	12.5	
D	7½	12.5	12.5	
E	2½	12.5	- -	left district
F	2½	12.5	- -	left district
G	8	12.5	11.5	
H	5	12.5 (2 mo.)	11.4	
I	8	12.5	11.5	
J	3/4	7.75	- -	transferred to EMR
K	5	8.75	- -	full time in regular classroom
L	8	10	10	
M	7	7.5	7.5	
N	2	- - -	2.17	
O	1½	- - -	2.5	

The project staff submitted two kinds of data for objective 2. The project staff submitted pre-posttest data from the Walker Problem Behavior Identification checklist. The results from the pre-posttest can only describe a change in teacher attitude toward the child. More significantly, those data submitted by the project staff are relevant to on-task behavior (Table 3) and the individual programs that either increased or decreased appropriate or inappropriate behavior. These data indicate objective 2 was met.

The project staff experienced minimal success meeting objective 3. As the project staff pointed out in the results section, four of the 15 students followed a well-defined transition program. The project staff may want to start with the regular classroom teacher assuming full responsibility for each of these students and the resource room teacher providing the needed assistance to the regular classroom teacher in conducting these individual programs.

The third party evaluator would like to thank the project staff for a well written report.

Title of Project: Interdisciplinary Team - Diagnostic

Location of Project: Klamath Falls

Population Served: 49 Learning Disabled Students

Funding Allocated: $20,000

Project Beginning Date: September 1, 1976

Project Ending Date: June 8, 1977

Background and Rationale:

The administration of the city schools and we of the county felt there were a good many students with learning disabilities and/or emotional problems who needed more special help than we had been able to provide.

This program was designed to try to assist this particular segment of the school population.

It has been found through individual evaluations of learning disabled students, that these students had severe reading problems. In all cases, the youngsters chosen for our teacher aides to see were children who had reading problems. Practically all of these students were being enrolled in programs being conducted by the special reading teacher in each of the eight schools. However, we felt the Title VI aides could be supportive and give additional help to these reading disabled students. We felt they could be successful in providing one to one instruction that was designed and initiated by the special reading teachers in each building.

Methodology:

A meeting was held in October of 1976 with the Director of Special Education for the Klamath Falls City Schools, the Counselor for Mental

Health Department, and the Director of Special Education, Klamath County School District. The purpose of this meeting was to determine exactly how this program would be coordinated in conjunction with the city schools and the Mental Health Department. It was determined that Klamath County would be able to employ two teacher aides. The following was mutually decided:

(1) the Mental Health Department would be available to evaluate students who had psychological problems that interfered with their ability to learn.

(2) a physician would be available through Mental Health to administer physical examinations for students who were in need of this service.

(3) Two teacher aides would work with students who had real difficulty in trying to keep up academically with their peers. In all cases these students had difficulty in reading.

The Director of Special Education contacted each principal in the eight elementary schools. They discussed the students with whom the two aides would be working. In some cases these students had already been evaluated by the Director of Special Education and therefore the student's specific learning problems had been determined.

In early November, the two teacher aides were chosen. One aide is a qualified elementary teacher. The other aide had a degree outside the field of education. The first meetings were held with each student's teacher and the special reading teacher in each of the elementary schools. The Title VI aides had a chance to discuss strengths and weaknesses of the individual student. The aide worked directly under the supervision of the reading teachers in each of the eight schools they visited.

The Special Education Director, Extreme Learning Problems Resource Specialists and the special reading teachers collaborated to give ample orientation time to the aides before students were actually seen on a regular basis. Each aide worked at four different schools. Each student was seen from two to three times per week. Each aide worked four hours a day, five days a week. Forty-six students were seen individually or in small groups by the two aides during the year.

Objectives:

1. To increase the reading and math skills of selected learning disabled children.

Evaluation: The Wide Range Achievement Test will be administered on a pre- posttest basis and the differences will be reported.

Results: Table I contains those data of 46 students in the areas of reading and math. From left to right it reads student, grade level, pretest, posttest, and difference.

Third Party Evaluator's Comments:

Those data supplied the Teaching Research staff indicate the objectives set forth for the project have been met.

The project staff submitted pre- posttest reading and math data for 46 Klamath County students. The 46 students made a modest mean gain of .5 in the area of reading. In the area of math, those same 46 students made a mean gain of .5.

The third party evaluator would like to thank the project staff for submitting a timely final report.

Table 1
N = 46
Wide Range Achievement Pre- Posttest Results for Learning Disabled Children

Student	Grade	Reading Pre	Reading Post	Reading Diff	Math Pre	Math Post	Math Diff
1	3	3.5	3.8	.3	3.0	3.0	0
2	4	3.3	4.2	.9	3.9	3.6	-.3
3	4	2.0	2.3	.3	3.2	3.9	.7
4	5	1.8	2.1	.3	3.6	5.0	1.4
5	5	3.5	3.5	0	3.9	3.2	-.7
6	5	5.9	6.7	.8	3.6	3.6	0
7	5	3.3	3.5	.2	4.7	4.7	0
8	6	4.5	5.4	.9	4.2	4.7	.5
9	6	6.1	6.9	.8	2.9	4.7	1.8
10	6	4.2	5.8	1.6	2.9	4.4	1.5
11	6	5.0	5.4	.4	5.7	6.7	1.0
12	6	3.9	4.6	.7	2.9	3.9	1.0
13	4	2.4	2.8	.4	3.2	3.9	.7
14	6	2.6	3.2	.6	3.4	3.4	0
15	1	Kg.6	1.3	.7	Kg.3	Kg.7	.4
16	2	2.9	2.6	-.3	1.8	2.4	.6
17	4	2.4	2.5	.1	3.9	4.2	.3
18	2	2.7	2.6	-.1	2.4	2.6	.2
19	1	1.3	1.6	.3	1.6	2.4	.8
20	1	1.5	2.8	1.3	Kg.7	1.8	1.1
21	1	1.2	1.4	.2	Kg.7	1.9	1.2
22	2	3.6	4.7	1.1	1.9	2.2	.3
23	1	1.3	1.6	.3	1.6	1.9	.3
24	3	2.3	3.1	.8	3.0	3.2	.2
25	3	1.9	2.5	.6	2.6	2.6	0
26	1	1.3	1.8	.5	1.0	2.2	1.2
27	3	2.9	3.0	.1	3.2	3.9	.7
28	5	2.6	2.9	.3	4.2	5.0	.8
29	4	2.7	2.2	-.5	3.2	3.6	.4
30	5	2.8	3.2	.4	4.2	5.7	1.5
31	4	3.6	3.9	.3	2.8	3.9	1.1
32	6	5.9	7.5	1.6	3.9	2.9	-1.0
33	6	6.6	7.7	1.1	5.7	6.5	.8
34	4	2.8	3.5	.7	3.0	3.9	.9
35	6	5.7	6.2	.5	4.7	4.4	- .3
36	6	3.5	4.6	1.1	4.9	4.4	- .5
37	6	4.7	5.4	.7	3.6	3.4	- .2
38	2	2.8	3.5	.7	2.1	3.2	1.1
39	2	2.3	2.8	.5	2.2	3.0	.8
40	5	3.3	4.2	.9	3.6	3.9	.3
41	2	1.9	2.3	.4	2.4	2.9	.4
42	6	2.9	3.5	.6	4.5	3.9	- .6
43	5	4.4	4.7	.3	4.5	4.7	.2
44	2	1.2	1.9	.7	1.0	1.8	.8
45	2	1.7	1.9	.2	2.2	2.2	0
46	4	2.3	2.7	.4	2.2	3.9	1.7
				$\overline{X} = .5$			$\overline{X} = .5$

Title of Project:	Program for Learning Disabled and/or Emotionally Disturbed Children
Location of Project:	Klamath Falls
Population Served:	78 Learning Disabled and/or Emotionally Handicapped Children
Funding Allocated:	$17,600
Project Beginning Date:	September 1, 1976
Project Ending Date:	June 30, 1977

Background and Rationale:

The Title VI project was undertaken to fill voids and/or weaknesses in our special education service:

(1) The early identification of LD and ED children and subsequent corrective education programs.

(2) Interdisciplinary staffings, additional evaluations and subsequent educational programs for target children.

(3) To increase support services to target population.

(4) To improve delivery skills of parents, teachers and paraprofessionals by providing meaningful in-service programs.

Methodology:

After the project was approved, a brochure outlining the scope and sequence of our Title VI program was distributed to community agencies. A Title VI case study form was developed and dispersed to serve as a collective interdisciplinary report. An interdisciplinary meeting was held to discuss Title VI program forms, scope and sequence of the project. The interdisciplinary team consisted of:

(1) Mental Health representative
(2) Children's Services Division
(3) Pediatrician
(4) 2 Psychiatrists
(5) School Nurse
(6) Resource Specialist
(7) Special Education Director
(8) 2 Parents

The above persons (excluding the two parents), classroom teachers and building principals played a role in identifying target population. Our Title VI aides were hired and inserviced. Target population's school, medical, and developmental histories were reviewed by an assessment team. Paraprofessional evaluation on Title VI participants was provided as indicated. All Title VI participants were given a pre and post evaluation (social and academic).

Educational program planning was completed by assessment team, implementation was directed by Resource Specialist via trained paraprofessionals.

Deviant behaviors were targeted by classroom teacher using the Devereaux Elementary Behavior Rating Scale, Walker Problem Checklist, and Social/Emotional Growth Chart. Level of acceptable performance was 20% improvement in each of the identified target deviant behaviors. Individual Education Plans were written by Resource Specialist. Input for IEP's came from various sources, parents, doctors, school nurse, psychiatrists, and child's teacher. IEP's were implemented by Resource Specialist, Title VI aides, classroom teacher and building principals. Resource Specialist met with Title Vi aides weekly, and teachers as appropriate, to make necessary program adjustments.

Objectives:

1. To implement prescriptive programs for learning disabled and/or emotionally disturbed children.

Evaluation: The number of children receiving prescriptive programs will be recorded and reported. The number and type of prescriptive programs that each child reached criterion on will be recorded and reported.

Results: The data for this objective has been summarized as follows: 140 programs were implemented, 87 (62%) were completed, and 53 programs were ongoing. These data cover 78 students enrolled in the program.

2. To reduce or eliminate deviant behaviors of selected emotionally disturbed children.

Evaluation: Pinpoint the behavior, collect baseline data, specify a criteria level of acceptable performance, design and implement a program, collect interim data until criteria is reached. Collect probe data to monitor the maintenance of the behavior.

Forty programs were written for 36 students. Of these 40 programs, 20 (50%) were completed and 20 programs were ongoing.

3. Those children participating in the programs for the learning disabled and/or the emotionally disturbed will show an increase in academic skills (math and reading).

Evaluation: Appropriate standardized tests will be selected and administered on a pre- posttest basis. The results will be recorded and reported.

Results: The following data have been summarized from individual pre- posttest scores using the Wide Range Achievement Test. In the area of reading comprehension, 56 students achieved a mean gain of 1.07. In the area of spelling, 49 students achieved a mean gain of .7. And finally, in the area of math 50 students achieved a mean gain of .3.

4. To increase program delivery skills of parents, teachers and paraprofessionals.

Evaluation: The number and type of programs implemented will be recorded and reported. The number of programs for which the children reach criteria will be recorded and reported.

Results: A total of 10 workshops were held for parents, teachers and paraprofessionals. Fifty-eight parents, 139 teachers, and 15 paraprofessionals attended the workshops.

Twenty-seven parents implemented 24 programs, 6 were completed, and 16 were ongoing. Of these 22 programs, 18 were behavior.

Thirty-four teachers implemented 34 programs, twelve of these 34 programs were completed, 14 of of these programs were behavior programs.

One hundred twenty-nine paraprofessionals implemented 112 programs. Seventy-one of these programs were completed, 43 of which were behavior. Those other programs conducted by parents, teachers and paraprofessionals were academic.

Third Party Evaluator's Comments:

In reviewing the data submitted by the project staff, the third party evaluator took the liberty to summarize five legal size pages of data. Because of restrictions placed on document size, the summarization was necessary.

In reviewing each of four objectives it becomes apparent that each has been met. It becomes obvious that the project staff placed most of its efforts and resources in the area of reading, as the gains were significantly better than the students' gains made in the areas of spelling and math.

Parents, teachers and paraprofessionals implemented 170 programs. Of these 170 programs, 89 were completed. The paraprofessionals had the highest percentage of completed programs (63%) of the three groups.

The Teaching Research staff would like to thank the project staff for its effort during the project year.

Title of Project:	Parent Readiness Education Project
Location of Project:	Lake County
Population Served:	25 Preschool Children with Learning Disabilities
Funding Allocated:	$40,000
Project Beginning Date:	September 1, 1976
Project Ending Date:	June 8, 1977

Background and Rationale:

Many of our children who attend kindergarten or the first grade are not ready for organized classroom activities. This program will identify children with learning disabilities and help the parents develop learning skills and management skills for their four or five year old children. Research does indicate the earlier you can identify learning disabilities the easier the disabilities can be corrected in: expressive language, visual skills, auditory skills, small and large muscle coordination, improving self concepts, and the world around us.

Methodology:

We believed that what happens at home does make a difference. We wanted to lead parents to the realization that a child's first and most important teacher is his/her parents. Through weekly participation, the parents under the guidance of a certified teacher trained in working with parents, learn how to enrich the home environment and how to develop important readiness skills at home. These skills, the activities that go along with them, as well as Child Development and Child Management Skills are discussed during the weekly parent sessions. The parents made inexpensive teaching materials to use with their child at home. The project teacher met with identified children one morning a week and the parents carried on related activities with the children at home for the rest of the week. The parents and staff were seen as partners in an effort to prepare youngsters for school. This partnership brought about changes in the home environment that were of value to the youngster and older children as well. The children served experienced a more cognitively stimulated home environment and a more positive effective interaction with their parents.

Objectives:

1. Twenty-five preschool children will improve their language and conceptual abilities, auditory perception, discrimination abilities, visual perception, and motor coordination through class and home instruction to a level of the upper 3/4 of the Caldwell Cooperative Test by June 30, 1977.

Evaluation: The Caldwell Preschool Inventory will be administered on a pre- posttest basis for each child.

Results: Twenty-three of the 25 students scored in the upper 3/4 of the Caldwell Cooperative Test. (See Table 1) The project staff also administered the Draw-A-Man section of the Caldwell Preschool Inventory. All but one student made significant gains in the Draw-A-Man pre- posttest (See Table 2).

Third Party Evaluator's Comments:

The project staff submitted the final report to Teaching Research in a complete form but very late.

The content of the report indicates that Objective 1 was not met. Twenty-three of the 25 students scored in the upper 3/4 of the Caldwell

Preschool Inventory. This does not suggest that the project was not successful. On the contrary, 92% of the children met or exceeded the criteria of the objective. The objective may have been somewhat unrealistic for a first year project.

Table 1

Caldwell Preschool Inventory Pre- Posttest

Child No. *	Pretest	Posttest	Difference
1	48	57	9
2	46	48	2
3	38	54	16
4	46	57	11
5	44	63	19
6	45	56	11
7	33	53	20
8	25	53	28
9	48	61	13
10	25	46	21
11	32	51	19
12	35	58	21
13	45	56	11
14	43	58	15
15	48	59	11
16	43	51	8
17	37	48	11
18	29	50	21
19	21	51	30
20	44	58	14
21	37	56	19
22	38	60	22
23	48	60	12
24	40	56	16
25	18	43	25

Table 2

Draw-A-Man Section of Caldwell Preschool Inventory Pre- Posttest

Child No.	Pretest	Posttest	Difference
1	6	10	4
2	5	7	2
3	4	13	9
4	5	8	3
5	6	11	5
6	5	[illegible]	4
7	4	8	4
8	0	9	9
9	7	12	5
10	0	7	7
11	0	10	10
12	6	10	4
13	5	12	7
14	11	16	5
15	4	12	8
16	7	8	1
17	5	11	6
18	4	8	4
19	4	9	5
20	7	9	2
21	7	9	2
22	0	7	7
23	0	10	10
24	5	4	- 1
25	2	9	7

Title of Project: Child Evaluation Center
Clackamas County I.E.D.

Location of Project: Clackamas County I.E.D.
Marylhurst, Oregon

Population Served: Learning disabled students in eleven Clackamas County school districts (with an average daily membership of 1,000 or less) where there are limited special education services for youth with learning disabilities.

Funding Allocated: $36,600

Project Beginning Date: August 23, 1976

Project Ending Date: May 27, 1977

Background and Rationale:

Within Clackamas County there are ten districts with an average daily membership (ADM) of 1,000 or less where there are no special educational services for youth with learning disabilities. These districts represent a total enrollment of 2,071 students in grades one through eight. Due to transportation costs in sending children to other Child Evaluation Centers, limited awareness of the concept of learning disabilities, lack of staff training to work with learning disabled youth, and irregular coordination between agencies involved with youth with learning disabilities, there have been approximately 67 children identified as having extreme learning problems and receiving only limited educational services. In addition, many of the remaining districts have limited consultation services or a county-wide coordination of programs to provide for the learning disabled child.

All school districts within the county continue to express urgent concern regarding the early drop-out rate, not only for those presently not attending school but also requesting assistance with some preventative measures to impede the escalating rate of early high school drop outs.

The coordination of support agencies concentrating on students with learning problems is very limited and irregular. In cases where outside agencies have completed an evaluation, recommendations are too often lacking in specific detail to allow an easy translation of diagnostic information into meaningful educational programs for the child. In addition, outside agencies are unable to assist in either the implementation or follow-up of treatment programs. Parents and teacher must deal with the child's problem armed with a report which clearly identifies the problem, an account of learning strengths and weaknesses, and specific methods and materials to use with the child.

Methodology:

During September and October teachers and administrators from the eleven school districts attended after school inservices featuring an overview of learning disabilities, the role of the center and its staff, and the process to follow for referral. Each teacher received a copy of a learning disabilities checklist (to be used as a guide or provide more detailed information about a child) and a referral form.

Evaluations were begun in October and continued at a minimum of 3 each week through early April. Parents brought their children to the center and spent about one hour with the LD specialist discussing the history of the child's problem (medical, developmental, family, behavior, school, etc.). Meanwhile, the psychologist administered various tests to the child. Before lunch the speech/language specialist began testing the child while the psychologist and ID specialist discussed impressions based on the initial testing results. Whenever possible the staff ate lunch with the child where spontaneous speech, behavior, fine motor skills, etc, were observed.

The academic evaluation was done after lunch, followed by the remaining speech and hearing tests.

Compiling the test data, history, instructional recommendations, and home suggestions was done as soon as possible after the test date. For some children it was necessary to complete some testing at the school. Students were observed in the school setting whenever feasible.

When the final report was completed, a copy was sent to the parents (and to the family doctor, if so indicated). Parents were contacted by phone after they had time to read the report. A staffing date was set with school personnel--usually the classroom teacher, the reading teacher/aide, the Evaluation Center LD specialist, and most often, the speech/language specialist. The evaluation report was reviewed and materials furnished by the center were discussed. One weak point of the project was often observed at this point: Teachers were under no obligation to use any of the recommendations or materials. Also, it was sometimes suggested that students in need of special education be placed in a resource room or EMR class. Because of limited resources, this was generally not acted upon. Often it was recommended that teachers and aides attend certain classes or workshops to gain specific skills in order to work more effectively with L.D. students. Also, sometimes it was necessary to suggest materials that the center could not provide for the schools. Usually the latter two suggestions were not followed, although some inservices classes and an extensive curriculum materials fair was provided. Classroom teachers were contacted regularly, by phone, letter, and/or school visits. This was partially dependent on their willingness to work with the child, the severity of the problem, and the child's age. (Teachers of younger children seemed much more likely to follow recommendations.) Remedial reading teachers were usually very cooperative. Some schools provided aides to work with children who had been evaluated.

A survey of inservice needs (regarding L.D. students) within the eleven districts revealed interest in after school classes in behavior management, identification of L.D. children, speech and language development, and tests/materials/methods for remediation of reading, math, and spelling/writing problems. Eight classes were held in schools throughout the county with an average of nine teachers attending each.

In an effort to identify young children who may experience learning problems in school, the districts were offered a screening program for kindergarten and first graders. A screening instrument was designed which included tasks in visual memory, number concepts, visual-motor integration, auditory discrimination, and body awareness, among others. This 30 minute test was administered to 68 children. The findings (along with recommendations) were sent to the teachers. Results of the screening test indicated that the most common problems were in the areas of auditory/visual memory, motor development, and visual-motor integration. Also, a large number of children displayed mixed dominance.

A need was identified to provide a regular meeting place and time for various specialists (ELP, EMR, Reading, Speech, Aides, etc.) in the smaller districts of the county. Many times these teachers are the only specialists in their districts (buildings) and do not have many opportunities to share information with others working in the special education field. Several meetings were held during the year, the most successful of which was a curriculum fair featuring materials appropriate for individualizing. Over 100 Clackamas County teachers and administrators attended, mainly from the smaller districts.

Objectives:

1. By June 1977, 35 severely learning disabled children will have received extensive psychometric, educational and speech, language and

hearing evaluations (medical evaluations provided as indicated) to be completed within a month after referral.

Evaluation: Record the number of referred and learning disabled children evaluated. The type of learning disability and the disposition of the referred child will be recorded and reported.

Results: Forty-seven children were referred from 11 school districts. Three were not evaluated because of parent refusal. Forty-four children were evaluated by the center staff with 41 receiving full psychological, academic, and speech/language/hearing evaluations.

2. By June 1977, 35 learning disabled children will be given prescribed instructional programs based on their specific learning modality and the selected areas of math, reading, spelling, and language.

Evaluation: A record of prescribed instructional programs within two weeks of evaluation will be reported. A record of prescribed programs specify methods and materials will be reported. The Wide Range Achievement Test (WRAT) subtests in reading, spelling, and math, will be administered on a pretest/posttest basis. For selected children in language programs, the Peabody Picture Vocabulary Test (PPVT) will be used on a pre/post basis.

Results: Of the 41 students receiving full evaluations, 29 were posttested using the WRAT. (The remaining 12 were not posttested because: (1) they moved; (2) were not evaluated and staffed until shortly before posttesting began, or (3) had been identified as not learning disabled.) Three students were also posttested using the Peabody.

Table 1 shows the pre- and posttest scores from the WRAT and the time duration between pre and posttests. It is also indicated whether or not the school used the prescribed instructional program with the student. The fact that the schools were not obliged to use the recommendations or materials or to attend the inservices in remedial techniques was a weakness of the program. Table 2 shows the pre and posttest scores from the Peabody Picture Vocabulary Test.

Third Party Evaluator's Comments:

Both of the objectives in this project were met. Forty-four children were evaluated by the project staff. Forty-one received complete evaluations. All teachers were provided with suggested instructional programs, including those who were recommended by alternative placement such as an L.D. classroom or an EMR classroom.

Twenty-nine students were pre/posttested on the WRAT in the areas of reading, spelling and math. All but five students showed some gain across all areas. The mean duration in months between pre- and posttest was 4.5 months. The project staff indicated that seven school districts of twenty-nine used the recommended program. The mean gain for children from these districts was .57 months. Six districts elected not to use the instructional procedures. The mean gain for students from these schools was .03 months. These data indicate that the school district should have followed the recommended instructional programs. The third party evaluators recognize that the project staff had little control over this and had no alternative except to provide the material and encourage the classroom teachers to use them.

Child	C.A. at time of Pretest	Grade	WRAT - Reading			WRAT - Spelling			WRAT - Math			Duration of Pre/Post (months)	Use of Materials (see below)
			Pre	Post	Gain	Pre	Post	Gain	Pre	Post	Gain		
1	11.0	5	3.6	3.6	.0*	2.6	2.9	.3	4.2	5.3	1.1	3.5	*
2	8.8	1	1.4	1.7	.3+	kg.9	1.7	.8	1.9	2.4	.5	7.	+
3	6.6	1	kg.8	2.0	1.2+	kg.7	2.3	1.6	1.0	2.8	1.8	7.	+
4	8.2	2	kg.9	1.5	.6+	1.3	1.5	.2	2.2	2.6	.4	6.	+
5	9.0	3	1.3	1.4	.1	1.3	1.4	.1	2.4	2.6	.2	3.	#
6	6.1	2	1.2	1.5	.3+	kg.9	1.2	.3	1.0	2.1	1.1	7.	+
7	12.11	7	5.6	5.8	.2*	3.7	3.7	.0	7.1	7.4	.3	4.	*
8	6.3	1	kg.9	1.6	.7+	kg.6	1.5	.9	1.2	2.2	1.0	6.	+
9	8.5	2	2.2	2.9	.7	1.4	1.4	.0	2.6	3.0	.4	4.	#
10	10.4	4	1.9	2.0	.1*	2.0	2.9	.9	2.1	2.8	.7	4.5	*
11	11.8	5	2.9	3.0	.1*	2.5	2.9	.4	3.9	5.0	1.1	3.	*
12	9.3	3	2.5	5.0	2.5	2.2	2.7	.5	2.2	3.2	1.0	5.5	#
13	11.11	5	4.2	5.6	1.4	3.2	3.7	.5	4.5	3.9	-.6	4.	#
14	13.3	6	2.2	2.4	.2	3.3	3.3	.0	2.9	3.4	.5	5.	#
15	14.1	7	4.4	4.4	.0*	2.2	3.3	1.1	3.4	3.4	.0	4.	*
16	11.4	6	5.3	6.5	1.2	4.2	5.0	.8	3.9	3.9	.0	2.	#
17	12.8	6	4.4	3.5	-.9	2.6	3.3	.7	3.4	3.4	.0	4.5	#
18	10.11	5	6.1	7.0	.9	3.9	2.7	-1.2	5.0	5.5	.5	3.	#
19	8.6	3	4.4	4.5	.1	2.2	2.7	.5	2.6	2.8	.2	2.	#
20	10.7	4	2.5	3.1	.6+	2.0	2.5	.5	3.2	4.5	1.3	6.	+
21	9.8	3	1.4	1.7	.3+	kg.6	1.5	.9	1.2	1.4	.2	5.	+
22	11.7	5	3.8	4.5	.7	3.0	5.7	2.7	4.2	5.2	1.0	3.	#
23	8.2	2	2.1	2.5	.4	1.4	2.6	1.2	2.4	3.0	.6	3.	#
24	13.0	7	4.8	4.6	-.2*	3.3	3.3	.0	3.4	2.9	-.5	7.	*
25	10.4	5	3.5	3.8	.3	2.3	2.9	.6	3.2	3.9	.7	6.	#
26	8.6	3	4.2	4.8	.6	3.0	3.5	.5	3.0	3.2	.2	3.	#
27	9.5	3	2.6	3.5	.9	2.6	3.7	1.1	3.2	3.6	.4	3.	#
28	9.10	3	2.8	3.3	.5	2.5	3.7	1.2	3.2	3.9	.7	3.	#
29	8.4	3	2.3	3.0	.7	2.2	3.7	1.5	2.8	2.4	-.4	6.	#

* School did not utilize prescribed materials/recommendations
+ School generally utilized materials/recommendations
# School utilized a few materials/recommendations

Table 1
Academic Pre/Posttesting

Table 2

Language Pre/Posttest

PEABODY PICTURE VOCABULARY TEST						
Child	C.A. at time of testing	Grade	Pre	Post	Gain	Duration of Pre/Post
1	8.2	2	8.4	9.1	.7	5.
2	9.4	3	11.0	11.2	.2	4.
3	9.3	3	8.2	8.9	.7	5.5

Title of Project: TMR Classroom
Location of Project: Clackamas County IED
Population Served: 8 TMR
Funding Allocated: $20,000
Project Beginning Date: August 15, 1976
Project Ending Date: September 15, 1977

Background and Rationale:

In the past six years the TMR population has increased by 164% and the number of classrooms has grown from 5 to 13 in Clackamas County. For the 1976-77 school year one additional classroom had been budgeted to provide for the increase in students that was predicted. The actual increase was greater than the estimates and another classroom was needed to serve these students.

Methodology:

Moderately to severely mentally retarded students aged 13 years to 20 years received educational placement in an elementary school. These students were integrated into regular school activities whenever possible and were charted throughout the year using BCP (Behavioral Characteristic Progression). Based on observations and parent conferences early in the school year students were evaluated on an average of 11 strands. Nine individual programs were implemented on the strands observed. Student objectives were updated three times during the year and appropriate probes were conducted. One teacher and a teacher aide provided these services.

Objectives:

1. Provide individualized and group training/educational programs for 12 TMR children in a classroom setting.

Evaluation: Eight students were placed on an average of 9 BCP strands and these were updated three times during the year.

Results: Table 1 shows the number of BCP programs administered to each participating student and the percentage of the programs on which each student met the criteria level. Examples of strands being employed were reading, math, writing, self-identification, articulation II, impulse control, inter-personal relations, attention span, task completion, reasoning, auditory perception, visual motor II, gross motor II, language development, language comprehension, etc.

Third Party Evaluator's Comments:

Data displayed in Table 1 indicates that each of the eight children in this classroom made considerable gains during the school year. Probes taken after the original criterion level was met indicate a range of 60% to 100% maintenance of skills across the eight children. Probe 1 indicated a mean of 80.8% of the skills were maintained and probe 2 showed that 93% of the skills were still intact. The staff is to be commended for their diligence in taking probe data to demonstrate that the various skills were maintained over time.

TABLE I

Child	Number of Programs Administered	Number of Programs Met Criteria Level of Administered Programs	Number of Programs Partially Met Criteria of Administered Programs	% Met Criteria of Administered Programs	% Partially Met Criteria of Administered Programs	Probe (1) % Maintained	Probe (2) % Maintained
1	55	34	15	62%	27%	94%	85%
2	67	35	17	52%	25%	81%	96%
3	33	23	7	70%	21%	Not here	100%
4	82	39	26	48%	32%	70%	95%
5	78	40	27	51%	35%	86%	88%
6	48	24	13	50%	27%	80%	86%
7	69	36	19	52%	28%	60%	94%
8	53	41	7	77%	13%	95%	100%
						$\bar{X}$ 80.8%	$\bar{X}$ 93%

Title of Project: Yamhill County "Early-In"

Location of Project: Yamhill County I.E.D.

Population Served: 40 four and five year old children in Yamhill County who had potential learning disabilities

Funding Allocated: $33,172

Project Beginning Date: August 2, 1976

Project Ending Date: June 30, 1977

Background and Rationale:

The needs addressed in the "Early-In" project are universal. They are critical for every child entering school. The project states that no child should be hindered by any physical, emotional, or mental handicap that could possibly prevent him from developing to his fullest potential. If that handicap can be prevented or remediated by identification, treatment, or training it should be done.

Yamhill County Intermediate Education District (YCIED) proposed to coordinate a county-wide survey and assessment, and prescriptive home intervention program for four and five year old children. The purpose was to locate and assess as many four and five year old children in Yamhill County as possible and to provide prescriptive home intervention and follow-up services for those children identified as handicapped.

"Early-In" activities, from the initial survey to the posttesting of children provided the following processes:

A. A program to meet federal and state requirements which mandate the identification, evaluation and service to all handicapped children, including those with less obvious handicaps.

B. A screening process free of negative connotations associated with labeling children.

C. A feasible process to screen large numbers of children.

D. A process which identified mild, less severe handicaps which are usually ignored or unnoticed until later age in school.

E. An intervention program which would train parents and focus on growth related needs of their child.

F. An intervention program which would be acceptable to participating school districts who would be in a position to provide follow-up when the child was of school age.

Methodology:

In August 1976, the State Department of Education selected Yamhill County as a validation site for the "Early-In" Program developed in Union County. In carrying out the requirements of this validation contract, it was the intent of the Early-In staff to provide as much service, assistance and information to children and families in all eight school districts in the county as possible and at the same time gather information on the effectiveness of the Early-In Program.

Census of preschool children was compiled by use of data sheets distributed through the public schools, newspaper publicity, and use of volunteers. Most effective census was conducted by a high school home economics class who did a door to door survey.

Volunteers were trained in four communities in the county and they assisted in screening children in all eight communities involved. A total of 48 volunteers, including 10 high school students were trained.

Once the screening was completed parent meetings were conducted to explain the results of the screenings. Four hundred thirteen parents, representing over 50% of the 652 children screened, attended these meetings.

Eighty-eight children were identified as eligible for Home Intervention/Instruction but with the limited staff (2 FTE) only 40 children could be served. These 40 children were visited once a week during February, March, and April. Staff used a curriculum provided by Union County, and they also devised curricula to meet needs of the children and capabilities of parents they served.

Post screenings were held in all communities and 110 children who did not participate in the program in the fall were screened in addition to 480 children who participated in both fall and spring screening sessions.

A survey was conducted by mail to assess reactions of families who participated in the program. Out of 630 surveys sent out 244 (39%) were returned. Only one negative response was returned.

Contacts with schools and school personnel varied with the district. Half the eight districts were supportive of the program, worked closely with the Early-In staff and used results of Early-In screenings and Home Intervention/Instruction. Responses from four of the districts varied from nonparticipation to indifference.

The families with children in the Home Intervention/Instruction Program have been especially supportive of the program. All staff members were highly successful at individualizing the curriculum and at reinforcing parents' success with their children. The positive change in parents' skills and attitudes was probably as great or greater than the increase in children's school readiness skills.

Objectives:

1. Early-In Screening will be offered to all located children in eight (8) developmental areas. These were: cognitive, sensory-motor, visual discrimination, vision, hearing, speech/language, and social/emotional development using the Screening Test for Early Progress (STEP) developed by Union County.

Evaluation: Will keep records on sessions held indicating number of children attending and number who do not attend but are known to staff.

Results: Early-In has compiled a list of pre-first grade children in Yamhill County.

846 total children found through census; 296 four year olds, 550 five year olds.

652 participated in fall screenings; 217 four year olds, 435 five year olds.

590 participated in spring post screening; 189 four year olds, 411 five year olds; 480 from fall screening, 110 new.

762 of the 846 children known to staff participated in the Early-In Program.

2. Referrals will be made for further testing for children who appear to be disabled in vision, speech, or motor development.

Evaluation: Number of children referred will be compiled by category. Referral forms will be on file.

Results: Referrals; 108 vision; 50 speech; 2 motor; 4 physical and 3 emotional and/or behavioral.

Refferals were made to the Yamhill County Health Department (including school nurses and Yamhill County Child Development Clinic), IED Speech Therapist, School District Speech Personnel, School Counselors, University of Oregon Crippled Children's Division, Physical Therapist, IED Education Evaluation Psychologist and private physicians.

3. All four and five year old children assessed with STEP who have four or more sub-scores below their chronological age will be eligible for Home Intervention/Instruction.

Evaluation: Number of children who are eligible for Home Intervention/Instruction will be compiled.

Number of children selected for Home Intervention/Instruction will be compiled.

Results: 652 children screened in the fall.

99 children were below their age norm in 4 or more areas.

88 children were 3 months or more below age norm in 4 or more areas.

48 children selected as highest priority. Of these: two could not be located, two families were not interested, one child had severe emotional problems, and four were served in other programs.

Thirty-three children were selected for Home Intervention/Instruction. In the interview process, it was discovered that in seven homes, siblings of the child chosen for Home Intervention/Instruction were in an age bracket to receive help from the program. One was older and had been removed from first grade, five were younger and below age norms in more than one area, and one was a twin. These seven children were included in the Home Intervention/Instruction Program bringing the total to 40 children.

4. All children receiving Home Intervention/Instruction will show increases in sub-scores so that profiles obtained from STEP posttesting more nearly matches chronological age.

Evaluation: Profiles obtained from pre- posttesting with STEP will be compared and results will be on file.

Results: 40 children started Home Intervention/Instruction.

8 children participated in Home Intervention/Instruction but moved before post screening was done.

32 children completed the 14 weeks and were post screened.

The profiles obtained from pre- posttesting with STEP have been compared and the results are on file for these 32 children. Each profile includes pre- post screening results. These show the gains made by each child in each category. The posttest profiles more nearly match or exceed the chronological age in all but one case. Table 1 lists those 32 children in order of the differences in total pre- post raw scores. Table 2 shows the distribution of differences in raw scores for all 32 children. There appears to be no significant grouping of either four's or five's. Home Intervention/Instruction appears to be equally effective with four's and five's.

One child had a lower score on the posttest than on the pretest. There was a loss of 7 points. This child was picked up as the younger sibling of a child screened in a kindergarten setting. This child was initially screened at home in a one-to-one setting. In the spring post screening, the child was screened as part of a group. This was perhaps the first group experience for that child.

Tables 3 and 4 show gains in raw scores of individual children. In Table 3 11 of the 12 four year old children had raw scores indicative of potential learning difficulties.* At the conclusion of 14 weeks of Home

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*Union County Information:
High Risk Pretest Scores: 4's - 35 or below; 5's - 55 or below
High Risk Posttest Scores: 4's - 50 or below; 5's - 70 or below

Intervention/Instruction, 16 out of the 20 children no longer had scores considered high risk.

In summary the four year old children as a group were brought to their chronological age level or above in six curriculum areas. They made significant gains* in 9 of 12 areas. Both "picture completion" and "relationships" were 3 months below chronological age at posttesting but gains of 8 and 10 months respectively were made. The least gain was made in auditory discrimination. This may be an area that needs more specific screening tools and/or perhaps more curriculum emphasis. The five year old group made significant gains* in all areas.

Another measure of the progress of these Home Intervention children will be their scores on the Metropolitan Reading Readiness test which they will take in school this fall. These scores will be collected by Union County for their validation study.

Third Party Evaluator's Comments:

Results of this project are excellent. In all aspects the project successfully met their goals. They most certainly did an outstanding job of validating the Early-In Program as designed by Union County.

One of the unfortunate aspects of the project was that they couldn't serve all of the pupils they identified as needing help. The project was limited by the number of staff available and they should be commended for serving as many pupils as they did. It is unfortunate that they could not have acquired additional funding so that they could acquire more staff.

It will be interesting to follow the progress of the 40 children served as they move through school. It is hoped that this will occur.

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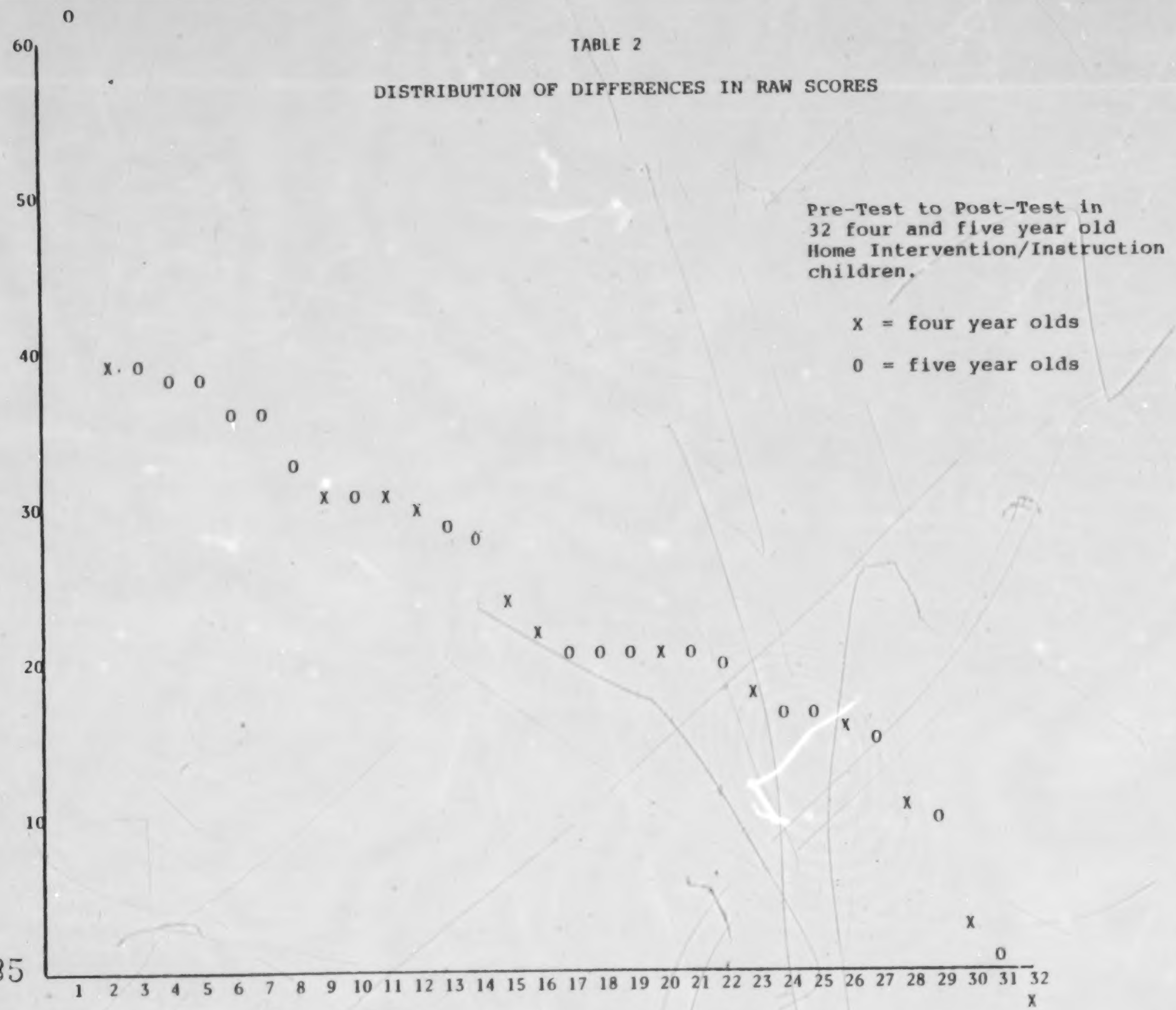
*More than 5 months of chronological age increase.

TABLE 1
RANK ORDER OF DIFFERENCES IN RAW SCORES
N=32

Child	Differences in Scores	Raw Score		Age
		Pre	Post	
1	64	16	80	5
2	39	12	51	4
3	39	32	71	5
4	38	46	84	5
5	38	37	75	5
6	36	34	70	5
7	36	44	80	5
8	33	54	87	5
9	31	25	56	4
10	31	47	78	5
11	31	17	48	4
12	30	26	56	5
13	29	44	73	5
14	28	14	42	4
15	24	31	55	4
16	22	14	36	4
17	21	56	77	5
18	21	63	84	5
19	21	61	82	5
20	21	33	54	4
21	21	52	73	5
22	20	47	67	5
23	18	25	43	4
24	17	56	73	5
25	17	60	77	5
26	16	28	44	4
27	15	70	85	5
28	11	41	52	4
29	10	75	85	5
30	3	15	18	4
31	1	20	21	5
32	-7	27	20	4

TABLE 2

DISTRIBUTION OF DIFFERENCES IN RAW SCORES



Pre-Test to Post-Test in
32 four and five year old
Home Intervention/Instruction
children.

X = four year olds

0 = five year olds

TABLE 3

GAINS IN RAW SCORES - FOUR YEAR OLDS

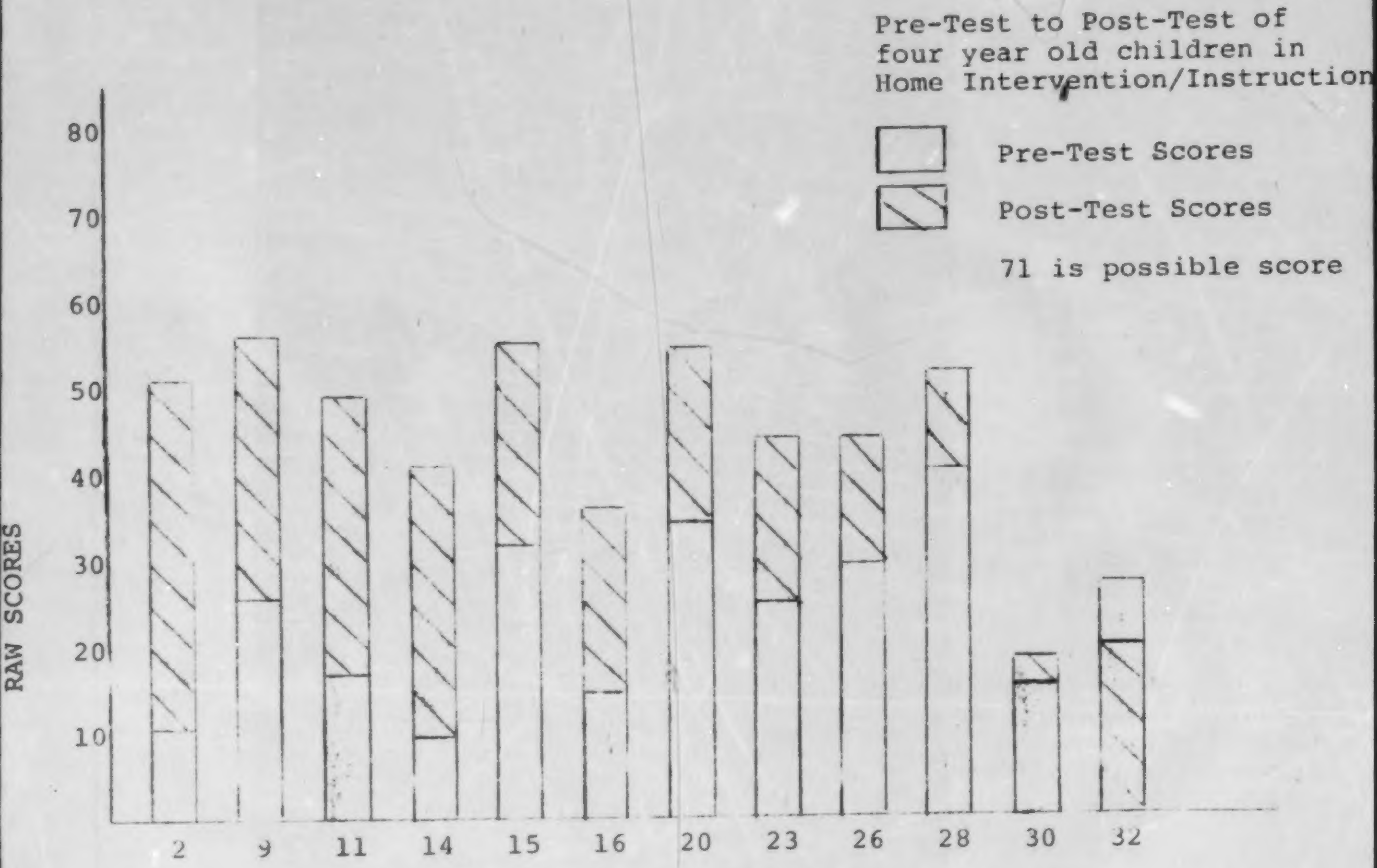
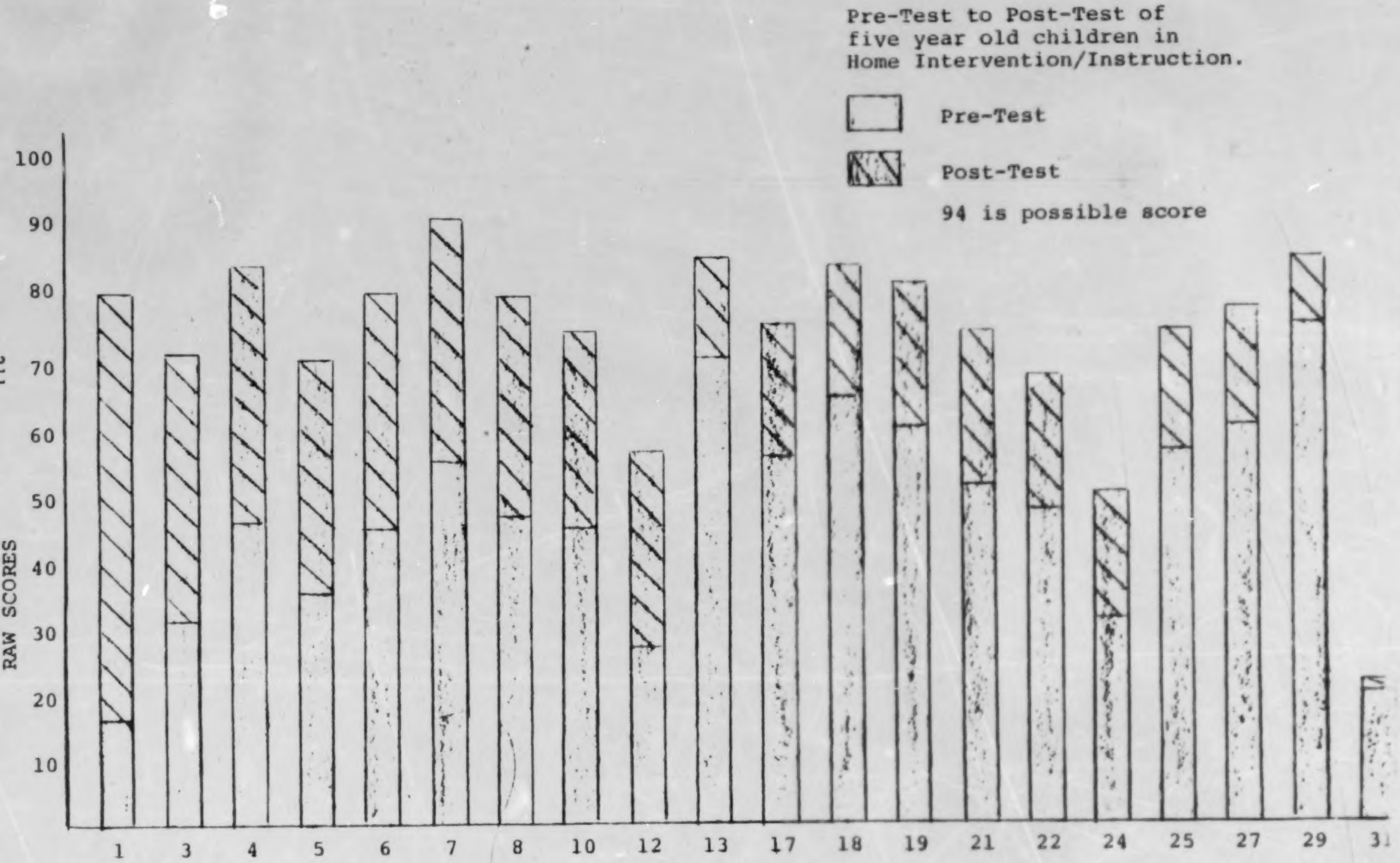


TABLE 4

GAINS IN RAW SCORES - FIVE YEAR OLDS



Title of Project: Early Childhood Outreach Through Parent Training

Location of Project: Jackson County Intermediate Education District

Population Served: Handicapped Preschool Children

Funding Allocated: $64,000

Project Beginning Date: August 9, 1976

Project Ending Date: June 30, 1977

Background and Rationale:

This project was undertaken to provide early intervention to preschool handicapped youngsters. A substantial amount of data support the conclusion that early intervention is both preventative and corrective, since learning deficits may be identified and treated early in the child's educational experience.

In Jackson County, because of the rural and remote location of some families, the high expense of transporting students great distances, the severity of some handicapping conditions, and the lack of classroom teacher's time to provide home instruction, many handicapped preschoolers were left with no educational services.

Early Childhood Outreach Through Parent Training has breached that gap in Jackson County. The teachers went right to the child's home one time each week, and on a daily basis, parents offered instruction to their children on prescribed lessons. Working closely with parents, more than forty preschool handicapped children were provided with instructional services this year.

Methodology:

The model adopted for our use was the Portage Project of Portage, Wisconsin. This model is a home-based training program which centers on a home teacher who trains parents to become more effective teachers of their own children. The home teacher instructs parents on how to target appropriate teaching tasks, how best to present them, and how to record and assess their child's performance in order to continually modify teaching goals and procedures to meet the child's individual needs.

Each child referred to the project for services was screened using the Alpern-Boll developmental profile designed to identify the child's functional level in five developmental areas: cognitive, self-help, socialization, motor development and speech/language. Once the functioning level had been identified, the home teacher targeted three or four emerging skills or behaviors for instruction. The teacher wrote the instructional objective, recording procedure and directions to the parent for each skill to be learned on separate activity charts. At the next home visit the teacher then took baseline on the targeted skills, and modeled the teaching procedure with the child while the parent watched. The parent, in turn, modeled the teaching procedure just observed for the teacher. The parents provided instruction to their child throughout the week. The home teacher returned one week later to collect the activity charts, record post-baseline data and present new activity charts. The entire process was then repeated throughout the year for each skill or behavior targeted for instruction. See Table 1 for a diagram of the components of the Portage Project Model.

The following process was observed in the collection of data pertaining to the behavioral objectives:

a. Project staff prepared prescriptive instructional programs for each child.

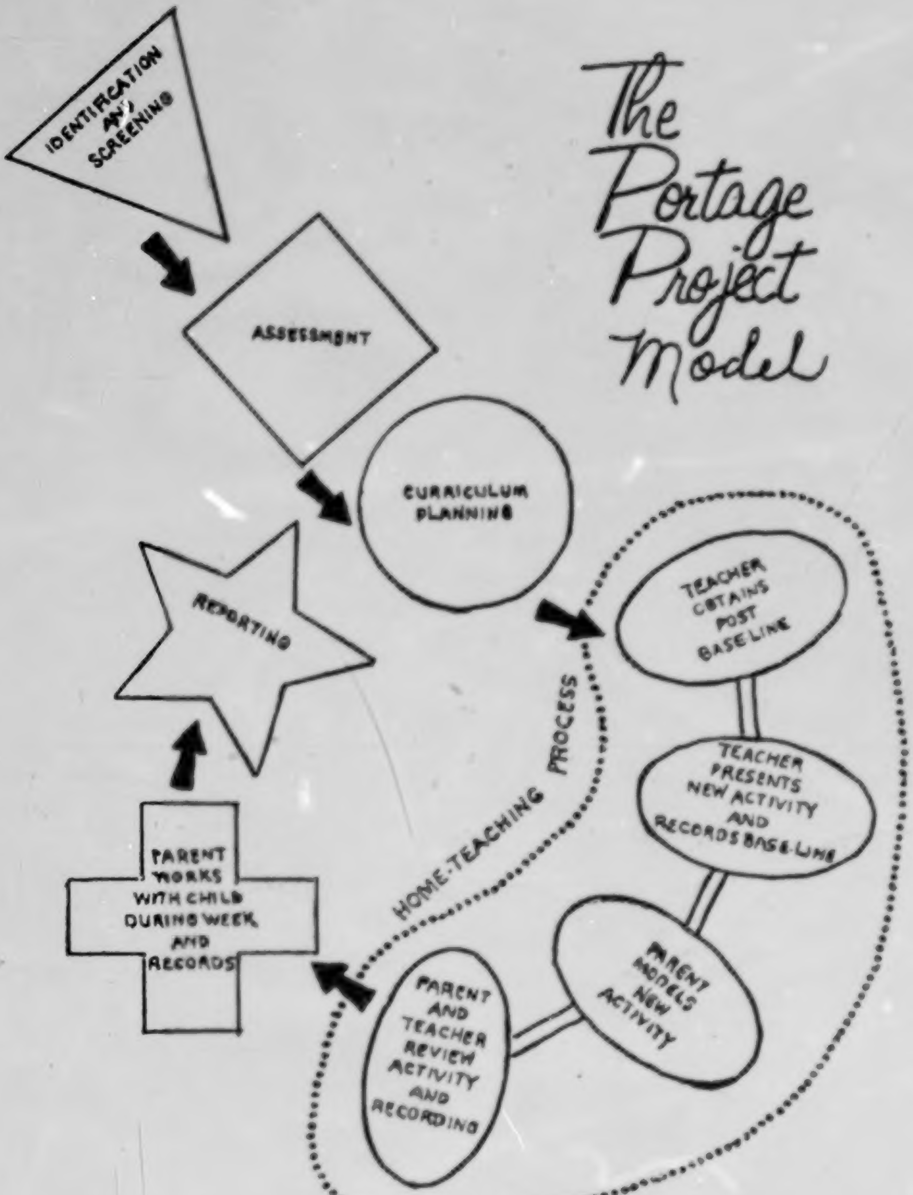
b. Project staff collected baseline information on each assigned prescription.

c. Project staff modeled the instructional process of each assigned prescription for each child's parent.

d. Parent executed the instructional process with their child and recorded the child's response daily.

e. Project staff collected post-baseline information on each assigned prescription.

Table 1


The Portage Project Model
IDENTIFICATION AND SCREENING
ASSESSMENT
CURRICULUM PLANNING
TEACHER OBTAINS POST BASE LINE
TEACHER PRESENTS NEW ACTIVITY AND RECORDS BASE-LINE
PARENT MODELS NEW ACTIVITY
PARENT AND TEACHER REVIEW ACTIVITY AND RECORDING
HOME-TEACHING PROCESS
PARENT WORKS WITH CHILD DURING WEEK AND RECORDS
REPORTING

Objective:

1. Ninety percent of project students will attain 80% of instructional objectives as established for them, within a one week period of time.

Evaluation: A record of all assigned prescriptions will be on file with initiation and completion dates noted for each objective assigned.

Results: A total of 39 children participated in the project. Table 2 indicates the number of months each child was in the project and the child's growth in each of five developmental areas. A few of the children had progressively degenerative conditions hence the negative growth of some children in specific developmental areas. According to the Alpern-Boll Developmental Profile, also used as a pre and posttest, significant growth was made by project children. The youngsters had an average cumulative growth of 154%, where 100% is the average expected growth for a normal child. Between 147% and 173% average gains were made in each area. The behaviors were targeted especially in the child's areas of delay. The staff felt that some parents took personal pride in pleasing the teacher; hence some growth was due in part to the fact that a few parents worked especially hard with their child in all areas in order to win teacher approval. Table 3 shows the total number of objectives prescribed, the total number completed, and the percentage completed. Seventy-five percent of the established objectives were attained by 94.9% of the students, 80% by 92.3% of the students, and 90% by 84.6% of the students.

Table 2

Growth in Months by Child by
Program and Cumulatively as Measured by the Alpern-Boll

		GROWTH IN MONTHS					AVERAGE GROWTH	
CHILD #	MOS. IN PROGRAM	PHYSICAL	SELF-HELP	SOCIAL-IZATION	ACADEMIC	COMMUN-ICATION	ACTUAL	PERCENT
1	8	0	-2	0	0	0	-0.3	-4
2	2	16	24	18	28	6	18.4	920
3	8	8	12	14	8	4	9.2	115
4	8	12	16	22	16	4	14.0	175
5	5	2	0	0	0	2	0.8	16
6	6	6	0	0	0	4	2.0	33
7	9	8	0	8	12	12	8.0	89
8	8	0	24	12	20	48	20.8	260
9	3	6	0	12	22	6	9.2	307
10	3	16	0	22	8	16	12.4	413
11	9	38	28	16	12	10	20.8	231
12	8	12	0	12	10	4	7.6	95
13	4	4	2	0	10	4	4.0	100
14	8	14	8	0	24	4	10.0	125
15	9	2	0	-4	-2	-2	-1.2	-13
16	9	5	0	0	8	14	5.4	60
17	8	14	12	16	18	34	18.8	235
18	6	10	2	26	16	0	10.8	180
19	8	10	10	14	18	18	14.0	175
20	8	0	6	4	6	6	4.4	55
21	7	28	18	14	0	6	13.2	189
22	6	26	10	20	24	28	21.6	360
23	8	30	56	8	6	38	27.6	345
24	6	0	18	0	0	4	4.4	73
25	6	6	24	18	28	4	16.0	267
26	8	20	16	0	12	12	12.0	150
27	8	6	6	6	8	4	6.0	75
28	7	12	10	10	6	10	9.6	137
29	3	2	6	8	3	2	4.2	140
30	3	8	16	0	0	2	5.2	173
31	8	4	0	12	6	2	4.8	60
32	9	14	16	12	25	14	16.2	180
33	6	8	8	10	2	10	7.6	127
34	8	10	26	42	32	18	25.6	320
35	6	6	20	0	10	16	10.4	173
36	6	8	10	6	0	6	6.0	100
37	5	4	20	6	3	6	7.8	156
38	4	0	0	0	24	6	6.0	150
39	4	14	20	12	16	26	17.6	440
TOTAL AVE.	6.54	10.0	11.3	9.6	11.3	10.5	10.1	154%
AVE. PERCENT		153%	173%	147%	173%	161%		

Table 3

Number of Objectives Prescribed, Number Completed and Percent Completed

CHILD NO.	TOTAL NO. OBJECTIVES PRESCRIBED	TOTAL NO. OBJECTIVES COMPLETED	PERCENT COMPLETED
1	13	12	92.31
2	13	13	100.00
3	33	30	90.91
4	41	39	95.12
5	11	7	63.64
6	36	33	91.67
7	41	41	100.00
8	47	47	100.00
9	12	12	100.00
10	14	13	92.86
11	68	68	100.00
12	52	51	98.08
13	4	3	75.00
14	53	51	96.23
15	45	40	88.89
16	62	61	98.39
17	56	54	96.43
18	44	38	86.36
19	55	54	98.18
20	46	43	93.48
21	38	35	92.11
22	49	48	97.96
23	62	56	90.32
24	27	27	100.00
25	36	36	100.00
26	40	40	100.00
27	35	33	94.28
28	39	37	94.87
29	12	7	58.33
30	8	8	100.00
31	43	40	93.02
32	28	28	100.00
33	41	39	95.12
34	58	56	96.55
35	15	14	93.33
36	12	11	91.66
37	22	21	95.45
38	29	24	82.76
39	39	38	97.44
TOTAL	1432	1357	94.76%

Third Party Evaluator's Comments:

The goal of this project was that 90% of the students would achieve 80% of the objectives specified; 92.3% actually achieved that goal. An additional piece of data not computed by the project but which should be cited to further strengthen the reported excellent gains made by children is a different interpretation of the Alpern-Boll Developmental Profile. A detailed examination of Table 2 shows that 39 children were in programs, 25 of those children exceeded expected normal growth during the period and two additional children achieved normal growth. Considering that all of these children were diagnosed handicapped and despite the limitations of any assessment instrument such as the Alpern-Boll, the gains reported are phenomenal. The project truly deserves commendation.

Title of Project: Jackson County Intermediate Education District Program for Visually Handicapped

Location of Project: Jackson, Josephine, Curry and Klamath Counties

Population Served: 33 Visually Handicapped Chidlren, 4-21 Years of Age

Funding Allocated: $98,008

Project Beginning Date: August 30, 1976

Project Ending Date: June 16, 1977

Background and Rationale:

Thirty preschool and school aged children who resided in Jackson, Josephine, Curry, and Klamath counties were identified in May, 1976, as visually handicapped and were served by their local districts with the help of two itinerant teachers of the visually handicapped and two three-fourths time aides. Of these thirty children, ten were receiving indirect services such as ordering of large print materials, conferring with classroom teachers, supplying low vision aids, and evaluating visual efficiency. The remaining twenty received direct service as a supplement to their classroom instruction. The direct service consisted of prescriptive programming in the areas of educational deficits and were carried on by itinerant teachers, parents, and classroom aides.

Methodology:

Between August, 1976 and May, 1977, eight additional visually handicapped children were enrolled in the project while five were terminated. Half of the new referrals had recently moved into the project area; the other half of these students were new referrals who had lived in the area and previously had not been identified.

The staff of the Program for Visually Handicapped consisted of:

a. Coordinator Teacher - M.S. in Special Education for the Visually Handicapped

b. Teacher - M.S. in Special Education, Learning Disabilities

c. Teacher - M.S. in Special Education, Visually Handicapped

d. Preschool Teacher - M.S. in Visually Handicapped

e. Teacher Aide - B.A. in Sociology

f. Teacher Aide - B.A. in Education

g. Teacher Aide - B.A. in Education (.25 FTE)

h. Teacher Aide - B.A. in Elementary Education (.5 FTE)

The 33 visually handicapped students served by this project attended nursery, elementary, junior, and senior high schools, college, or classes for multi-handicapped. Twenty-one of the 33 children had programs prescribed and administered on an itinerant model following educational assessment. These prescriptive programs included print reading, spelling and math, braille instruction, abacus training, orientation and mobility instruction, typing, self-help, motor and language. Programs were also developed to extinguish undesirable behaviors.

Both normative and criterion-referenced assessment tools were used in diagnosis and remediation of academic skills. The normative tool used for reading, spelling, and math was the Wide Range Achievement Test. Criterion-referenced measures included the Gallistel-Ellis Test of Decoding Skills, Key Math Diagnostic Arithmetic Test, and the Manzanita Math Hierarchy of Skills Checklist.

Following an educational assessment, eleven children were found not to need direct instruction from the project staff but did need special materials such as tape recorders, taped recordings, and large print books. Teachers of these children received consultation and support from the project staff. One student was enrolled at the end of May, 1977 and at the conclusion of the year was undergoing assessment to ascertain the type of services he needed.

Low vision assessments were completed on eight students with five of those students receiving appropriate aids, materials or related equipment that improved their visual functioning.

Recreational programs, including backpacking, cross-country skiing, a bicycle trip, boating on the Rogue River, and rides in small airplanes were organized. These activities involved nine students, most of whom participated in three or four of the five activities.

An active parent group was organized and met regularly. Information was provided about services available for visually handicapped children in Southern Oregon, parenting techniques, and vocational possibilities for visually handicapped individuals.

A newsletter outlining current activities, new legislation and funding alternatives was published by the program.

Objectives:

1. By June, 1977, preschool visually handicapped children will acquire 90% of prescribed skills in the cognitive, motor, language, self-help and social areas.

Evaluation: The Portage Project Checklist, with adaptation for visually handicapped, will be used to pretest each visually handicapped preschooler. As skills are acquired, the completion data will be entered on the checklist. Evaluation will be an analysis of the data collected to acquire each skill.

Results: A summary of new skills gained by five preschool visually handicapped children as measured on the Portage checklist with adaptation for visually handicapped indicates an average of 71.4 skills gained per child across all curricular areas. Prescribed skills of 97.8% in the cognitive, motor, language, self-help, and social areas were acquired. Data in these areas are displayed in Table 1. In addition, an average of 12.3 months of normative progress was achieved in nine months time as measured by the Maxfield-Buchholz Scale of Social Maturity.

2. By June, 1977, school aged visually handicapped children will acquire 80% of the prescribed compensatory skills within the areas of braille, typing,

Table 1

Summary of New Skills Gained by
Five Preschool Visually Handicapped Children

(Average Length of Time in Program = 7.7 Months)

SKILL AREA	TOTAL # of Prescribed Skill Programs	TOTAL # of Prescribed Skills Acquired	TOTAL % of Prescribed Skills Acquired
Cognition	107	104	97%
Motor	69	68	98.5%
Language	76	74	97%
Self-Help	70	68	97%
Socialization	43	43	100%
TOTAL	365	357	97.8%

orientation and mobility, use of special equipment (i.e., abacus, tape recorders), use of low vision aids, and listening comprehension.

Evaluation: Checklists in braille, typing, orientation and mobility, abacus, and listening comprehension will be used for assessment of school aged visually handicapped children. Evaluation will be an analysis of the data collected to acquire each new skill.

Results: Eleven school aged children received a total of 21 prescriptive programs in compensatory skill areas of braille, typing, orientation and mobility, abacus, and listening comprehension. Data indicates 85.7% of prescribed programs in these areas were acquired. A breakdown of data in these compensatory skill areas may be found in Table 2.

In addition, 20 school aged children received training and used low vision aids, materials, and appliances to assist them in school. Of these 20 students, all used those aids, materials, and appliances as prescribed.

Table 2

Summary of Compensatory Skills Gained By Eleven School Aged Visually Handicapped Children

(Average Length of Time in Program for Students Involved in Compensatory Skills = 8.72 months)

SKILL AREA	TOTAL # of Prescriptive Programs	TOTAL # of Prescriptive Programs Acquired	TOTAL % of Prescriptive Programs Acquired
Braille	0	0	0
Typing	2	2	100%
Orientation & Mobility	10	10	100%
Abacus	5	4	80%
Listening Comprehension	4	2	50%
TOTAL	21	18	85.7%

3. By June, 1977, school aged visually handicapped children will acquire 80% of prescribed skills through remediation in reading, spelling, mathematics, and other academic subjects in which they are behind sighted classmates.

Evaluation: Checklists in reading, spelling, mathematics, and other academic subjects will be used for assessment of school aged visually handicapped children. Evaluation will be an analysis of the data collected to acquire each skill.

Results: Fifteen school age visually handicapped children received direct instruction to remediate deficits in the areas of reading, spelling, mathematics, and other academic subjects. A total of 138 prescriptive programs were administered, an average of 9.20 programs per student. Data indicate 94.2% of prescribed programs were acquired. A summary of these programs broken down into specific skill areas may be found in Table 3.

Table 3

Summary of Prescriptive Programming for School Aged Visually Handicapped Students in Seven Academic and Developmental Skill Areas

N = 15
Average Number of Programs Per Student - 9.20

SKILL AREA	TOTAL # of Prescriptive Programs	TOTAL # of Prescriptive Programs Acquired	TOTAL % of Prescriptive Programs Acquired
Reading	24	24	100%
Spelling/Writing	16	14	87.5%
Math	51	51	100%
Fine Motor	4	4	100%
Self-Help	34	34	100%
Visual Reception	7	3	42.8%
Physical Education	2	0	0%
TOTAL	138	130	94.2%

In addition, the project staff obtained pre and posttest measures of academic gain in math, reading, spelling, visual-motor integration, and visual reception. A summary of these results are displayed in Table 4.

4. By June, 1977, parents of visually handicapped students wishing to participate will acquire 90% of prescribed skills in behavior modification techniques and will teach their own children using prescriptive programs.

Evaluation: A pretest and posttest of behavior modification skills will be used to evaluate the acquisition of skills by parents of visually handicapped students.

Results: Prior to home-programming, itinerant teachers instructed parents in behavior modification techniques. Eight parents ran prescriptive programs

Table 4

Summary of Normative Progress

No. of Students	Ave. Length of Time in Program	Math	Reading	Spelling	Visual-Motor Integration	Visual Reception
12	8.58 months	+1.43				
12	8.75 months		+1.29			
12	8.58 months			+.68		
3	9.00 months				+1.14	
2	8.50 months					+2.95

written by teachers. Prescribed skills gained during parent-run home-programming by four preschool and four school aged visually handicapped children were measured using behavioral checklists. Data indicate an average of 18 new skills gained per child across all curricular areas. Of prescribed programs run in cognitive, motor, language, self-help, and social areas, 99.3% were acquired. Data in these areas are displayed in Table 5.

Table 5

Summary of New Skills Gained by Eight Visually Handicapped Children During Parent Administered Home Programs

(Average Length of Time in Program for Students Involved in Home Programming = 6.73 months)

SKILL AREA	TOTAL # of Prescribed Home Programs	TOTAL # of Prescribed Home Programs Acquired	TOTAL % of Prescribed Skills Acquired During Home Programming
Cognition	44	44	100%
Motor	11	11	100%
Language	24	24	100%
Self-Help	59	58	98.3%
Socialization	7	7	100%
TOTAL	145	144	99.3%

Third Party Evaluator's Comments:

This project achieved most objectives specified. Certain weak areas in prescriptive programming were noted although none can be considered serious nor should they detract from the overall project excellence in the area of prescriptive programming. Deficiencies noted were as follows: in Objective 2 only 50% of the prescriptive programs for listening comprehension were successfully completed. In Objective 3 only 42.8% of the visual reception and none of the physical education programs were successfully completed. An examination of Table 4 indicates that the gains made in spelling for 12 students over 8.58 months shows .68 normative gain. A .71 gain would reach normative standards. Given the very excellent gains achieved in other areas, one would expect higher gains in spelling. This is an academic area that probably needs strengthening to compare with the excellent progress shown in the other four curricular areas noted in Table 4.

Objective 4 was not achieved by this project. No data were submitted to indicate that parents were given a pre and posttest. Therefore, the project must be faulted for that failure.

Title of Project: Teaching Research Infant and Toddler Classroom

Location of Project: Teaching Research
Monmouth, Oregon

Population Served: Moderately and Severely Handicapped, all etiologies

Funding Allocated: $24,349

Project Beginning Date: July 1, 1976

Project Ending Date: June 30, 1977

Background and Rationale:

In Central School District 13J there are educational services being provided for handicapped individuals ages 6-21. At the current time there is no program operating with local or state funds to provide any kind of educational services to handicapped and delayed children, ages 4-6 years. Research indicates that early intervention and stimulation with children beginning at birth will minimize or eliminate the need for future institutionalization or lengthy involvement in special education programs. For this reason, emphasis on programming with young children and training of their parents in appropriate teaching techniques is of high priority.

For the last two years an Infant and Toddler program at Teaching Research Infant and Child Center has been operating under the funding auspices of the Bureau of Education for the Handicapped as a component of a national early childhood education model. That funding ceased June 30, 1976, and could no longer be used to support a service-oriented program. Because there are no other programs or facilities in Central School District 13J to provide services to handicapped children ages 4-6 years, it was felt to be a high priority to continue the operation of this program as the data collected thus far indicates a high degree of success and skill acquisition. Data are available which support the effectiveness of those procedures currently utilized in the Infant and Toddler program and this model was chosen as a basis for this proposal. Continuity of services to handicapped children is possible because the same model is utilized with staff already trained in the appropriate procedures. This eliminates problems often present when a child is moved from one setting to another, often resulting in loss of skills and time waste due to unfamiliarity with procedures, etc. Having both projects operating in the same facility and utilizing the same model for instruction eliminates those problems.

Teaching Research and Central School District 13J have worked together in the past on several projects including the Preschool for the Multi-Handicapped and the Bilingual Program.

Methodology:

Children for the project were chosen according to the following criteria:

1. Functioning between the ages of 4 and 6 years.
2. Exhibiting a delay or handicap in any area of development--language, motor, self-help or social skills.

The Teaching Research Preschool Handicapped Program follows a prescriptive curriculum and individual programming for a classroom of 15 delayed, moderately and severely handicapped children, developmental ages 4-6 years. The philosophy which underlies the model can be summarized as follows:

1. Every child, regardless of handicapping condition, can learn. If a child is not learning, the fault lies not with the child but with the teacher and the environment. The child will only learn at his maximum rate or potential if the teacher has identified and utilized the correct combination of cues, behaviors and consequences. Therefore, if the child is not learning, the teacher must experiment by modifying either the cue or consequence or by reducing the behavior to smaller steps so that the child is able to achieve. These modifications to the environment must be done systematically. The data which result from the child's attempt to perform the learning required should be carefully recorded so that an analysis of effects produced by the various combinations of cue, behavior and consequence can be made.
2. Handicapped children learn in the same way as normal children, only usually slower. Because a handicapped child often learns more

slowly than other children he requires, therefore, not less education than a normal child, but a more extensive and a more intensive education to compensate for his slower learning rate. This implies a more individualized program and a longer period of time spent on activities. Because it is generally impossible to extend the time of the school day, this extended period of learning must be carried into the home and the parent must assume the responsibility of conducting part of the instruction.

3. There is no definitive way of determining the extent to which a child will progress. Therefore, no ceilings are placed on the curriculum; the teacher must be prepared to take the child as far and as fast as he can go. Thus, the curriculum must range from very basic skills, such as toilet training, eating, and dressing, and basic motor movements such as head holding, and beginning receptive and expressive language, to more advanced academic skills such as reading and the utilization of numbers and number concepts.

4. Because the range of individual abilities among a handicapped population are usually greater than the range of abilities among a "normal" population, the classroom for the severely handicapped must conduct individualized programs. Therefore, all materials are sequenced or programmed to meet the wide range of individual needs.

5. Because of the wide range of individual differences in the handicapped population and oftentimes their unmanageability because of previous ineffective home training, effective instruction can oftentimes only be achieved in a one-to-one relationship. Therefore, the utilization of paraprofessionals to provide individualized instruction in the classroom is considered mandatory.

6. No child is refused admittance into the program because he is not toilet trained. In fact, toilet training is considered to be an essential part of the education program of moderately and severely handicapped children.

7. No child is refused admittance into the program because he is non-ambulatory. The development of fine and gross motor skills, including the ability to creep, crawl or walk, is an integral part of the curriculum.

8. No child is refused admittance because he cannot communicate. Instruction in communication skills is emphasized.

9. No lower age limit is established, allowing greater flexibility in admission of children to the program.

10. No lower limit on IQ level is established on the premise that IQ measures at the lower levels and with young children are unreliable estimates of capability.

Research literature demonstrates that the best results with handicapped individuals are achieved with the utilization of behavior modification techniques. Gardner (1968) states:

> Results of studies of the application of behavior modification techniques to the mentally retarded have clearly established this method as a primary therapeutic tool. This is particularly true for the severely and profoundly retarded for whom traditional methods have been of little value.

Gardner provides an excellent beginning bibliography for those interested in examining the wide range of application of behavior modification learning skills.

The curriculum utilized in this model is The Teaching Research Curriculum for the Moderately and Severely Handicapped (Fredericks, et al., 1975). Four major subject areas comprise the curriculum of the model described in this book. They are: self-help, language, motor and cognitive. Self-help skills include basic dressing, eating, toileting and personal hygiene plus more advanced stages of self-care. To establish individual programming in this area, as in any other curriculum area, a detailed task analysis of these complex behaviors was completed and the learning steps were sequenced. Each step of the sequence is approached as a behavior to be learned. These behaviors are then chained together, utilizing either forward or reverse chaining techniques until the entire behavior, or sequence of steps, is learned.

The second curriculum area is motor, which includes the entire range of basic motor movements from tone normalization and trunk righting, to sitting, to walking. The motor curriculum is sequenced and programmed to the extent that beginning recreational skills and fine motor skills, both upper extremity and lower extremity are included. Some standard physical education activities such as strength and stamina activities comprise part of the program.

Language refers to expressive and receptive oral and written language. For some children, signing and finger spelling and speech reading are necessary parts of language instruction.

Receptive oral language must necessarily start with attending behavior; that is, the child attending to task at hand. The next stages see the child responding to simple commands and then multiple commands. The ultimate in receptive language is an intelligent response to an abstract concept.

An experimental expressive oral language program was developed, known as the Teaching Research Initial Expressive Language Program (McDonnell, Fredericks, Grove, 1974). The program has eight sub-programs, the highest level of which is designed to teach the child to talk by chaining at least three words. Over 2,000 sequence steps compose the entire program. Should the child not possess any expressive language capability, this language program starts at the very basic fundamentals by requiring the child to imitate gross motor movements. If the child does possess an expressive language capability, deficits in that ability are determined and sub-programs are prescribed. During the course of a child's training, he might be working on one, two, or more of these sub-programs at one time. For instance, he might be building vocabulary, chaining words together and improving articulation.

Thus, the entire curriculum is based upon the principle of sequenced materials, task analysis of the behavior to be learned, and no lower or upper limits.

Priorities must often be set among these curriculum areas. If the child lacks some basic self-help skills, such as self-feeding, dressing, or toileting, parents will invariably specify these as their highest priority. To satisfy the parents and elicit their support and cooperation at home, the child is immediately placed in the appropriate self-help skill program.

However, the teachers and professionals involved may set their priorities differently. Language development is considered to be the most important curriculum area with motor development as the next highest priority. These priorities are based on the assumption that any schooling for the handicapped should have as one of its goals assisting the handicapped person to function more effectively in our culture. Poor language and poor motor movement are the two main indicators of a handicapped person. Therefore, to help remove the stigma of "handicapped," we concentrate on these two principle indicators with the goal of helping the handicapped person use language and movement as much like normal persons as possible.

Another area to which the curriculum must attend is the management of behavior. It is axiomatic that inappropriate behavior which can interfere with the learning process must be eliminated before effective teaching can occur. Thus, if inappropriate behaviors are present in a child, the initial teaching efforts with him may be the extinguishing of those behaviors. His entire individual program may be focused initially in that direction.

The manner in which the curriculum is presented to the children, namely through individualized programs, necessitates the teacher to manage a highly structured classroom situation. Because of the handicapping conditions of many of these children, individualized instruction is often necessary. (A distinction is made here between individualized programming and individualized instruction. Individualized programming refers to placing the child in a curriculum based on his functioning ability. Individualized instruction implies a one-to-one relationship when teaching.)

To administer this individual instruction the help of paraprofessionals (volunteers) is enlisted. Paraprofessionals are taught to use behavior modification techniques. The simplification of the entire behavior modification paradigm for these volunteers is essential to their success in using the techniques. Unfortunately, there is inadequate time in which to train them to a highly sophisticated level in the utilization of behavioral techniques, and the relatively rapid turnover among volunteers prevents a large investment in time and money in such training. However, they are taught proper cue and consequence delivery, data keeping, basic terminology, shaping and chaining. A method has also been developed to insure the maintenance of these skills.

Individual prescriptions or programs are prepared for each child. A program prescribes the behavior to be taught, the way in which the cue is to be presented and the consequence to be used. The volunteer as she administers the program to the child records data in a specified manner on how well the child performs. The method of communicating the programs to the volunteer is through each child's individual clipboard. The clipboard which contains the data sheets is also the medium through which the volunteer reports the progress of the child to the teacher. The tacher, or more accurately, the classroom manager, is then able to modify the programs for the children for the next day after an examination of the day's data.

A volunteer is either rotated among the children or is assigned to a child and works through a series of programs with the child each day. A qualified volunteer may stay with the same child all day because she is capable of teaching in all curriculum areas. The advantage to this method of course is that the volunteer becomes very familiar with consequences appropriate to the child.

As had been mentioned, the teacher is not considered a teacher but a classroom manager. Although these teacher/managers are certainly capable of teaching the children much more efficiently than their volunteers, more children will receive more instruction if the teachers devote the bulk of their energies to supervising volunteers working with the children and modifying programs as necessary. The teacher of course usually conducts the teaching when it is apparent that the child is having difficulty with a particular program. Data collected daily on each of the children require that the teacher re-examine the individual programs for the following day to determine if an alteration is needed in the reinforcers, the sequence of a behavior, or a cue.

The aide is responsible for the supervision of those children not involved in individual instruction. An activity table is maintained throughout the morning where those children not in programming receive additional instruction with small group activities, stimulation to determine new reinforcers, free play, and group instruction programs. Data are collected on inappropriate behaviors with treatment procedures defined.

Volunteers come from many different populations. The majority of those working in the classroom come from beginning education or psychology courses at Oregon College of Education, the campus on which Teaching Research is located. Included also are practicum and graduate students in the fields of special education or early childhood education. Minimum involvement is four hours a week with data on each individual's performance on the appropriate delivery of cues, consequences, and the recording of data sent quarterly to their prospective supervisors.

Parents of young children need to be involved in the program. Under the assumption that handicapped children learn in the same way as normal children, only slower, it is obvious that these children require not less schooling than normal children but more schooling. Since it is difficult to extend the learning day in the classroom, the learning day is extended into the home by converting parents into teachers.

Utilizing the same teaching methods to train parents as are used to train volunteers, the teachers teach parents the principles and techniques of behavior modification. Individual teaching programs are chosen to be taught in the home which are coordinated with programs being taught in the school; parents are urged to conduct these programs daily in the home for periods of ten to thirty minutes.

Objectives:

1. Provide educational services to handicapped preschoolers, developmental ages 4-6 years.

Evaluation: (1) Summative description of each child with attendance records. (2) Files available for examination with record of parent interview. (3) Pretest data for each skill area with a report of the percent of skills in each preschooler's repertoire, before training is initiated per skill area. (4) Percentage of programs conducted per child per week listed. Skill acquisition recorded as gains on placement test of the Teaching Research Curriculum for each preschool child. (5) Baseline and treatment data recorded for each inappropriate behavior specified. (6) Number of home programs conducted per child with percent of time run listed. (7) Observations made on each parent and volunteer's performance using the Teaching Research Volunteer Observation Form. (8) Eighty percent of the volunteers working in the program will define the specified behavioral terminology 80% correct.

Results: (1) Summative description of each child with attendance records.

Student #	Number of Days Present	Number of Days Absent
1	135	40
2	92	11
3	116	54
4	160	13
5	48	2
6	34	2
7	134	18
8	162	11
9	159	12
10	136	15
11	103	31
12	67	26
13	76	1
14	125	18

An etiological description of each child is available for inspection.

(2) Files available for examination with record of parent interview. Such files are available.

(3) Pretest data for each skill area with a report of the percent of skills in each preschooler's repertoire, before training is initiated per skill area. See (4).

(4) Percentage of programs conducted per child per week listed. Skill acquisition recorded as gains on placement test of the Teaching Research Curriculum for each preschool child. Eighty percent of the programs scheduled for each child were completed each week. Individual records of the days each program was conducted are on file.

The individual pretest data and posttest data for each program for each child are shown in Figure 1.

(5) Baseline and treatment data recorded for each inappropriate behavior specified. A total of twelve programs for inappropriate behaviors were conducted. The baseline data and the data at the conclusion of the school year are shown in Figure 2.

(6) Number of home programs conducted per child with percent of time run listed. As the lunch box system for home programs was employed during the year, the home program data are included in the data for objective 4. A total number of 15 home programs were conducted during the year averaging 1.25 per pupil.

(7) Observations made on each parent's and volunteer's performance using the Teaching Research Volunteer Observation Form. See Figures 3 and 4. Individual observational data are available for inspection. Figure 3 shows baseline data, the average of last two observations, for each volunteer in the area of cues, consequences and data. Figure 4 shows observational data for each observation on all parents volunteering in the classroom.

(8) Eighty percent of the volunteers working in the program will define the specified behavioral terminology 80% correct. See Figure 3 for these data. More than 80% of the volunteers achieved this criterion.

Third Party Evaluator's Comments:

The project was conducted as described and the third party evaluator is in agreement with the report findings that all the objectives have been met. The report is an account representation of the success of the project.

It is the third party evaluator's opinion the outstanding feature of the project is the use of the Teaching Research Curriculum to assess student functioning in a comprehensive manner and then to measure the success of individual educational programs. This process provides an overall degree of purpose and integration to the project that is unusual in efforts of this type. Also impressive was the monitoring of volunteer performance. This process not only provides quick feedback and direction to volunteers, but does such in a supportive one-to-one environment.

In short, this is a most encouraging project and I would hope to see further efforts aimed at extending this methodology into parent's homes to increase existing efforts in this area.

Student #1

Program	Baseline	Posttest or July 1
Put on T-shirt	3/10	10/10
Put on Jacket	5/9	8/9
Unbutton	3/11	9/11
Multiple Shape Box	15/45	27/45
Peg Board	0/33	33/33
Picture Puzzle	6/8	8/8
Pastes	2/55	55/55
Identifies objects w/auditory similarities	3/9	9/9
Identifies objects w/visual similarities	3/9	9/9
Common Objects	5/12	12/12
Matches basic shapes	0/16	16/16
Finds basic shapes	3/16	13/16
Matches colors	0/36	28/36
Finds colors	15/36	20/36
Motor Imitation	0/400	400/400
Draws Horizontal line between two parallel lines	3/30	30/30
Draws Vertical line between two parallel lines	23/30	30/30
Spontaneous vocabulary	2/15	14/15
Sound chains	30/100	45/100

Student #2

Correlates article of clothing w/body part	3/36	36/36
Identifies plurals	20/50	48/50
Finds basic shapes	14/16	16/16
Volunteers name of basic shapes	8/16	16/16
produces patterns in left/right sequence	0/21	21/21
Identifies name	22/23	23/23
Finds lowercase letters	86/96	94/96
Finds numbers 1-10	24/40	40/40
Verbalizes function of body part	12/24	24/24
Writes numbers 1-10	0/30	7/30
Volunteers names of numbers 1-25	25/30	30/30
Counts objects 1-10	0/10	10/10
Says by rote days of week	3/9	9/9

Figure 1

Figure 1, con't.

Student #3

Program	Baseline	Posttest or July 1
Identifies Plurals	20/50	50/50
Follows Command Containing Cond. Clause	10/40	15/40
Volunteers name of basic shapes	8/12	12/12
Finds colors	32/36	36/36
Volunteers names of colors	25/27	27/27
Produce patterns left/right sequence	4/5	5/5
Finds numbers 1-10	10/40	15/15
Sounds "s"	0/21	6/21
Reproduces square	3/6	6/6
Reproduces Triangle	1/5	5/5
Simulated walking	0/8	15/15
Resisted crawl	0/15	15/15
Weight bearing in kneeling position	0/5	5/5
Picture puzzle	5/8	8/8
Colors within circle	15/21	21/21
Floor touching	0/4	4/4
Rote counts 1-100	0/25	25/25
Gives parents' names verbally	2/3	3/3
Gives address verbally	2/7	7/7

Student #4

Zip and unzip	0/6	6/6
Finds numbers 1-10	9/40	40/40
Gives specified Number of objects 1-10	10/30	30/30
Knows equivalence (Objects to numbers)1-10	6/30	30/30
Head righting with ball	0/106	106/106
Walks with hose	0/12	12/12
Picture puzzle	5/8	8/8
Colors within circle	5/21	15/21
identifies plurals	4/50	50/50
Produces patterns in left/right sequence	1/21	21/21
Identifies name	4/23	23/23
Finds numbers 1-10	9/40	40/40
Functional reading	53/266	196/266
Signs and says A-Z	23/68	49/68
Signs Numbers 1-10	25/30	30/30
Reproduces square	1/6	6/6

Student #5

Student #5 left the program in November 1976.

Figure 1, con't.

Student #6

Student #6 left the program in November 1976.

Student #7

Program	Baseline	Posttest or July 1
Colors within circle	0/21	21/21
Bounce & Catch ball	0/22	6/21
Engage zipper	1/5	3/5
Button	2/11	11/11
Eat with spoon	1/6	6/6
Blowing nose	0/6	6/6
Identifies visual similarities	0/9	9/9
Identifies auditory similarities	5/9	9/9
Identifies action pictures	0/60	51/60
Correlates clothing with body part	0/54	24/54
Find body parts	0/20	11/20
Find shapes	12/16	16/16
Produce left/right sequence	0/6	6/6
Identifies name	4/23	23/23
Sound Chains	27/280	116/280
Total Communication	20/40	28/40
Draw Horizontal Line	28/30	30/30
Draw Vertical Line	29/30	30/30
Reproduce Triangle	2/5	3/5
Reproduce Circle	0/5	5/5
Identify Object of Position/Positioning	9/40	15/40
Student #8		
Identifies Common Objects	6/9	8/9
Match basic shapes	0/16	16/16
Match colors	9/36	11/36
Sound Chains	16/200	17/200
Imitate words	12/88	17/88
Draw Horizontal Line	0/30	9/30
Shapes on Board	10/22	22/22
Graduated Cylinders	45/80	80/80
Untie shoe laces	0/3	3/3
Bathroom	5/12	12/12
Wash hands	0/11	4/11

Figure 1, con't.

Student #9

Program	Baseline	Posttest or July 1
Shapes on Board	9/22	22/22
Picture Puzzle	2/10	10/10
Color within Circle	0/21	21/21
Cut with Scissors	6/48	15/98
Catch ball	8/32	10/32
Match Pictures to objects	0/90	90/90
Identifies action words	0/60	60/60
Identifies function of objects	44/56	53/56
Clothing with body part	10/36	25/36
Identifies plurals	20/50	24/50
Finds basic shapes	4/16	16/16
Identifies Name	5/23	17/23
Imitation of sounds chains	0/85	85/85
Draws horizontal line	24/30	30/30
Draws vertical line	25/30	30/30
Reproduces cross	1/6	6/6
Reproduces square	4/5	5/5
Reproduces triangle	2/3	3/3
Reproduces circle	4/9	8/9

Student #10

Identifies objects with visual similarities	5/9	9/9
Matches pictures / objects	9/90	90/90
Action Words	20/60	28/60
Correlates clothing with body part	0/48	24/48
Matches basic shapes	10/16	16/16
Matches colors	33/36	36/36
Total Communication	24/40	36/40
Sound Chains	2;/850	90/850
Draws Horizontal Line Between 2 parallel lines	4/30	30/30
Draws Vertical line between 2 parallel lines	2/10	10/10
Reproduces Cross	0/6	3/6
Puts on pants	6/7	7/7
Puts on jacket	3/9	9/9
Puts on shoes	6/7	7/7
Unbutton	2/11	11/11
Remove coat	0/6	6/6
Buttons	0/11	5/11
Put on coat	0/6	6/6
Washing hands	0/11	11/11
Brushing Teeth	0/12	12/12
Multiple shape box	4/45	45/45
Strings beads	2/9	9/9
Graduated Cylinders	0/80	80/80
Pegboard	0/7	7/7
Picture Puzzle	13/16	16/16
Pastes	21/55	55/55
Catches ball	10/42	17/42

Figure 1, con't.

Student #11

Program	Baseline	Posttest or July 1
Finds Numbers 1-10	0/90	40/40
Verbalizes names of numerals 1-25	23/30	30/30
Gives address verbally	3/7	7/7
Says by rote days of week	0/9	9/9
Identifies position & Positioning	26/40	40/40
Discriminates difference between same/different	6/15	15/15
Identifies polar opposites	33/39	39/39
Finds basic shapes	11/16	16/16
Volunteers names of basic shapes	11/12	12/12
Volunteers names of colors	28/36	36/36
Produces patterns left/right sequences	0/5	5/5
Identifies name	0/23	23/23
Verbalizes function of body part	0/24	24/24
Identifies function of object	22/60	60/60
Draws horizontal line	4/30	30/30
Grasps toy	6/30	24/30

Student #12

Identifies action words	0/60	60/60
Volunteers name of basic shape	0/16	16/16
Produces patterns in left/right sequence	0/21	21/21
Identifies name	2/23	23/23
Finds lowercase letters	38/104	68/104
Verbalizes function of body part	14/45	45/45
Identifies function of object	14/30	30/30
Correlates article of clothing w/body part	2/8	8/8
Colors within circle	1/21	21/21
Touches fingers in succession with thumb	2/12	12/12
Modified sit-ups	17/20	20/20
Rote Counts 1-25	42/100	60/100
Gives parent's name verbally	0/6	6/6
Gives birthdate verbally	0/6	6/6
Gives address verbally	0/7	7/7
Says by rote, days of week	0/9	9/9

Student #13

Maintains Eye contact	1/30	30/30
Produces left/right sequence	0/5	5/5
Identifies name	4/23	23/23
Verbalizes function of body part	0/24	24/24
Identifies function of object (Distar skills)	0/30	30/30
Draws horizontal line	5/30	30/30
Draws vertical line	25/30	30/30
Reproduces cross	1/6	6/6
Puts on t-shirt	8/10	10/10

Figure 1 con't.

Student #13, con't.

Program	Baseline	Posttest or July 1
Puts on shoes	6/7	7/7
Unbutton	9/11	11/11
Engage zipper	0/5	4/5
Tie shoes	0/7	2/7
Imitates arm movements	1/9	9/9
Graduated cylinders	8/80	80/80
Match numbers 1-25	58/100	92/100

Student #14

Rote counts 1-25	1/26	26/26
Find Numbers 1-10	31/40	40/40
Give parents name verbally	4/6	6/6
Give birth date verbally	1/6	6/6
Give sex verbally	0/7	7/7
give address verbally	1/7	7/7
rote days of week	0/9	9/9
Pastes	53/55	55/55
Colors within circle	0/21	21/21
Cutting with scissors	0/48	48/48
Match picture to objects	0/90	90/90
Identifies action pictures	7/60	60/60
Identifies function of object	47/56	56/56
Volunteers basic shapes	4/16	16/16
Finds colors	9/36	36/36
Produces left/right sequence	1/21	21/21
Identifies name	4/23	23/23
Match lowercase letters	92/104	104/104
Finds lowercase letters	56/110	60/110
Yes/No questions	0/15	15/15
Reproduces cross	0/6	6/6
Reproduces square	0/6	6/6
Reproduces triangle	3/5	5/5
Writes numbers 1-10	13/66	36/66
Puts on jacket	0/9	9/9

Student Number	Baseline	Termination/July 1
Student #1		
Command Compliance	60%	80%
Finger in Mouth	210/600 sec	540/600 sec.
Student #12		
Command Compliance	67%	85%
Student #8		
Biting	13 per day	0
Pinching	25 per day	.8 per day
Command Compliance	86%	85%
Student #7		
Command Compliance	42%	95%
Wearing Glasses	2 min, 5 sec.	3 min.
Student #9		
Command Compliance	70%	80%
Student #13		
Command Compliance	20%	80%
Off-Task at Activity Table	57%	2%
Student #14		
Tantrums	2 per day, 17 min.	0 per day

Figure 2

Baseline Data and Treatment Data Results
For Each Inappropriate Behavior Program

Teaching Research Classroom Experience

Term: Winter

Class: Preschool Handicapped

Volunteer #	Behavioral Terminology Criterion 90%		Baseline Observation			Average of Last Two Observations. Criterion: 90% in each area.		
	Pre	Post	Cues	Cons	Data	Cues	Cons	Data
1	100		87	62	75	93	93	100
2	36	100	100	100	100	100	100	100
3	56	100	70	70	100	100	95	100
4	64	100	100	80	100	100	100	100
5	80	100	100	100	100	95	90	100
6	56	100	40	40	30	100	93	100
7	88	84	100	100	100	100	100	100
8	100		100	100	100	100	90	100
9	88	100	54	27	54	100	93	100
10	100		100	100	100	100	100	100
11	100		100	100	100	100	100	100
12	0	96	93	75	93	100	93	100
13	80	100	100	0	100	100	95	100
14	68		100	30	100	100	92	92

Figure 3

Behavioral Terminology Data and Observational Data for Volunteers

Term: Fall Class: Preschool Handicapped

Volunteer #	Behavioral Terminology Criterion 90		Baseline Observation			Average of Last Two Observations. Criterion: 90% in each area.		
	Pre	Post	Cues	Cons	Data	Cues	Cons	Data
1	44	76	33	66	100	100	100	100
2	40	92	100	100	100	100	100	100
3	56	76	88	57	71	95	95	100
4	16	76	75	25	100			
5	40	88	100	90	80	100	100	100
6	32	64	100	66	0	100	88	100
7	44	65	25	100	100	100	100	100
8	68	100	100	100	100	100	100	100
9	20	72	100	80	80	92	92	100
10	40	95	100	43	100	100	100	100
11	28		100	33	100	100	100	100
12	68	92	100	100	100	100	100	100
13	52	68	75	88	100	100	94	100
14	60	100	100	67	100	94	75	100
15	67	84	100	100	100	100	100	100
16	44	88	88	55	66	100	100	100
17	55		100	33	100	100	100	100
18	32	28	100	88	100	85	80	100
19	76	100	100	100	100	100	100	100
20	60	100	51	58	100	100	100	100
21	40	68	86	80	0	100	100	100
22		92	75	25	100	100	91	100
23	36	80	100	70	90	95	70	100
24	24	72	100	35	66	95	95	100
25	16	100	100	100	100	100	100	100
26	65	100	100	75	88	100	90	100
27			100	100	100			
28	20		88	66	100	100	100	100
29	12		88	88	100	100	100	100
30			100	88	100	100	100	100
31	100		85	85	100	95	87	100
32			100	100	100			

Figure 3, Continued

Term: Spring

Class: Preschool Handicapped

Volunteer #	Behavioral Terminology Criterion 90%		Baseline Observation			Average of Last Two Observations. Criterion: 90% in each area.		
	Pre	Post	Cues	Cons	Data	Cues	Cons	Data
1	76	100	30	0	100	100	100	100
2	100		100	100	100	100	90	100
3	52	88	67	81	94	100	100	100
4	24							
5	100		73	100	70	100	100	97
6	84	100	73	93	100	100	100	100
7	100		92	71	100	100	76	100
8	80	84	9	48	93	91	91	100
9	100		100	100	100	92	92	100
10	100		100	100	100	100	100	100
11	100		93	100	100			
12	28		100	88	88	100	73	100
13			90	50	100			
14	72		100	100	100			
15	52	100	100	37	93	100	96	93
16	88	80	40	20	100	86	77	100

Figure 3, Continued

Parent #1	Cues	Consequences	Data
Observation #1	0	0	80
#2	66	77	44
#3	90	90	60
#4	100	100	100
#5	100	100	100
Parent #2			
Observation #1	83	83	100
#2	77	77	88
#3	100	100	100
#4	100	100	100
#5	100	100	100
Parent #3			
Observation #1	82	75	90
#2	87	90	100
#3	90	100	100
#4	95	90	100
#5	100	95	100
Parent #4			
Observation #1	93	41	71
#2	100	67	100
#3	100	100	100
#4	100	70	90
#5	100	90	100
Parent #5			
Observation #1	60	67	33
#2	60	60	90
#3	57	71	100
#4	100	25	100
#5	100	100	100

Figure 4

Observational Data of Parents as Volunteers

Title of Project:	Integrated Handicap Preschool--Learning Disabilities
Location of Project:	Benedictine Child Development Center Mt. Angel, Oregon
Population Served:	25 Children
Funding Allocated:	$15,689
Project Beginning Date:	September 1, 1976
Project Ending Date:	June 30, 1977

Background and Rationale:

The purpose of this program was to provide a preschool integration program for children who had both identified and unidentified handicaps, physical and mental. Children who had learning problems were also affected. The program focus was on those children who were identified as having potential learning disabilities. Success was provided for children who without the program most likely would have experienced difficulties or failure in the first grade.

Eliminating problem areas for children at an early age was felt to be the most effective remediation strategy for its effects on human dignity, cost effectiveness, efficiency, and discipline. The top priority goal of this program was to help young children begin their formal education more successfully.

Methodology:

The kindergarten program was conducted by a certified teacher and an uncertified aide. Both the teacher and the aide had previously participated in a special program at Central Point, Oregon, entitled Helping Eliminate Early Learning Disabilities. This kindergarten program was modeled after the one in Central Point.

The kindergarten ran 2-1/2 hours each day. Phonics and language development were the first priority. The program then followed with the use of science, social studies, and math materials. An organized physical activity was scheduled each day. The program was rounded out by music and art activities.

Pretests and posttests were given in September and May of the school year to determine the progress of each student. In addition, three conferences were held with parents to discuss individual problems and progress.

The pretest also gave information as the language ability of each child. This tool was used in forming three groups. The children met in these groups--Peabody language, phonics, and independent work, for one hour each day. This made it possible for individual children to progress at his or her own rate as well as to excel or be brought up to age level. The posttest shows the increase of all children who participated in the program.

To individualize instruction, three staff members were trained at Teaching Research and implemented prescriptive programs from the Teaching Research Curriculum for Moderately and Profoundly Handicapped. Programs were conducted in the areas of self-help skills, language, motor skills, and cognitive skills. When possible, programs were set up for parents to run at home with their children, and results were monitored by the staff.

Where inappropriate behaviors interfered with learning, individualized programs were set up and carried out to alter that behavior at school and/or at home.

The Special Education Coordinator carried out special programs and recommendations made by other agencies involved in evaluation or treatment of children with learning problems. Some of these activities included physical therapy and exercise programs, home enrichment projects, parent training, and speech programs set up by the therapist.

Objectives:

1. To help eliminate early learning disabilities of those children who would be unable to have any program prior to first grade.

Evaluation: A. Pre- and post-administration of Metropolitan Readiness Test. B. Pre- and post-administration of the Peabody Vocabulary Test. C. Pre- and post-administration of the Bender-Gestalt Test.

Results: The Metropolitan was given with a grade of C or better considered readiness level for first grade. On the pretest, 9 of 25 (36%) scored C or better, and on the posttest, 24 of 25 (96%) scored C or above.

The Peabody Picture Vocabulary Test was administered at the same time. There was a total gain over nine months of 398 months for 25 children. This shows growth of 1.77 months per month per child.

The Bender-Gestalt Test was given both in September and May. On the pretest, 3 out of 25 (12%) scored 12 or less, and on the posttest, 15 out of 25 (60%) scored 12 or less.

2. Handicapped children were integrated into a regular preschool program and learned routine school procedures, self-help skills, hand-eye coordination, language skills, large and fine motor skills, and social development.

Evaluation: Pre- and posttests were given in each skill level. Each child was evaluated by the Salem Evaluation Center and a speech evaluation was given by the IED therapist in the school district.

Results: Individual prescriptive programs were run with seven children. A total of 785 steps were completed, falling into categories as follows:

29 in self-help skills, 619 in language skills, 94 in cognitive skills, and 43 in motor skills.

Four children were seen by the staff at Salem Evaluation Center to determine their school readiness and/or to identify problem areas.

Six children were evaluated by the speech therapist from the IED and were involved in an ongoing speech therapy program two days a week for the school year.

3. Children with emotional and behavior problems were to be integrated with non-handicapped children to learn skills to maintain a task and to do routine school procedures and school readiness skills.

Evaluation: Baseline was taken on behaviors that needed to be eliminated. Data was kept on percentage of improvement weekly in order to keep adjusting programs.

Results: Behavior programs were implemented for seven children in the program to eliminate a variety of behaviors that interfere with learning in a school situation. Among the programs were command-compliance, extinguish putting non-edible objects into mouth, eliminate whining, aggressive behaviors, and special toileting programs. A total of 18 programs were run. Of these, 5 were also run at home, with the staff monitoring the home data turned in by parents. There were 5 programs completed, some of which have been kept on a maintenance basis and some of which were re-initiated with a higher criterion level.

Third Party Evaluator's Comments:

This project has completed each of its objectives and evaluation criteria as specified in the letter of agreement drawn up between the project director, State Department of Education, and the Third Party

Evaluator. The project staff should be congratulated for completing these requirements.

It should be mentioned that this service was rural in nature and therefore provided an education to needy children in Oregon who otherwise would not have had the advantages of preschool experiences. This appears to be an extremely beneficial use of Title VIB funds and the supplying of services to children who have not been serviced previously has always been a priority of Title VIB funds in Oregon and now has, in fact, been mandated by law.

This project appears to have worked effectively with varying handicapping conditions and this fact, combined with the integration of handicapped children with non-handicapped children made their task much more difficult. The gains reported in Language and the number of steps completed across the Teaching Research curriculum is indicative of their success.

Title of Project: Contingency Management

Location of Project: Carus Elementary School

Population Served: Behavior Problem Students
68 Direct Services
602 Indirect Services

Funding Allocated: $15,000

Project Beginning Date: August 30, 1976

Project Ending Date: June 3, 1977

Background and Rationale:

Carus Elementary School and vicinity had a need for someone to work with teachers and parents in regards to behavior problem children. It was anticipated that this need could most profitably be met by acquiring a specialist trained specifically in dealing with behavior problem children and who could also provide valuable consulting service to classroom teachers, especially in regards to classroom management strategies.

Methodology:

Students for this program were selected on the basis of recommendations arrived at during a staffing which included the teacher, the principal, the director of special education, and the behavior problems specialist. Occasional participating children were identified by Children's Services Division and by concerned parents. The Walker Behavior Problems Checklist was used on occasion to determine the magnitude of a child's problem.

Once children had been identified for the program, direct classroom observations were made to: (a) verify the presence of an actual problem; (b) establish baseline performance for later comparison and evaluation; (c) determine what teacher behaviors might be maintaining the problem; and (d) determine what teacher behavior would need changing to eliminate the problem. Treatments within the school setting for problem behaviors took one of three modes. These approaches are described briefly below:

1. One mode of treatment was to graph initial baseline data which was collected on both critical teacher behavior (praise, attention, criticism, etc.) and the child's problem behaviors (on task, hitting, etc.). A staffing was then held to show the relationship between the teacher's behavior and the student's behavior problems.

Advice was offered on how the teacher could change his/her behavior to decrease or eliminate the child's problem. If the teacher indicated willingness to try to change, data was collected and feedback given daily. These kinds of programs were continued until the objective or treatment was achieved and/or until the teacher stated that he/she had control over the child's problem.

Data collected on both child and teacher behavior was extremely useful in helping teachers to change without being threatened by the Behavior Problems Specialist's advice.

2. Behavioral contracts were used to decrease or eliminate problem behaviors which occurred within the school setting. Characteristically these contracts involved a statement of the child's problem in objective terms, a behavioral objective, which would provide evidence of suitable change, and specific procedures for obtaining the behavioral objective. These contracts were drawn up with the cooperation of the teacher, the child and the child's parents. The Behavior Problems Specialist served as contract writer, negotiator between individuals, and had general responsibility for running the program. Continuous observational data were collected on behavioral contract pinpoints, which provided vital information for contract changes and for program termination.

The Center at Oregon for the Research in the Behavioral Education of the Handicapped (C.O.R.B.E.H.) has developed two well-specified programs to be used for out-of-control classrooms and aggressive individuals. The Program for Academic Survival Skills (PASS) was designed by C.O.R.B.E.H. to help teachers effectively manage extremely unruly classrooms. The Behavior Problems Specialist used the PASS program on two occasions during 1976-77.

Contingencies for Learning Academic and Social Skills (CLASS) was designed by C.O.R.B.E.H. to control individual aggressive children. A CLASS program was applied to one child in the 1976-77 school year, with excellent results. Both PASS and CLASS programs were followed exactly.

3. Based upon research showing that behavior problem children are usually deficient in reading and/or math, the specialist at Carus also taught two special reading groups. The children who attended these groups had mild behavior problems and/or were considered learning disabled. All of these children were at least 1.2 years behind their peers in reading or math. The objective of this special reading program was to reduce the number of decoding errors made by each child on daily story passages. The Corrective Reading Program, Engelmann, et al. (1975) was the curriculum used. A token economy was used to reinforce appropriate academic and classroom behavior. Back-up reinforcers included bowling, trips, pencils, pens and marbles.

Objectives:

1. To modify the behavior of the socially and emotionally disturbed child so that he can function appropriately in the regular classroom.

Evaluation: Baseline data will be taken on the frequency of each behavior specified. Treatment strategies are to be initiated and data taken on the effectiveness of the strategies.

Results: Carus Title VI-B grant application estimated that the behavior problems program would directly serve 10-20 students during the school year. The data below shows the number of students who received different kinds of direct services and show the original estimate to be a conservative one.

A. Number of children worked with on a consistent basis = 15.

B. Number of children for whom PASS was used (baseline: total class on task less than 50%) = 39.

C. Number of children taught daily in special reading (L.D. or B.D. children) = 13.

D. Total number of children receiving direct services by Behavior Problems Specialist and Aide = 68.

The Title VI-B grant application also estimated that approximately 520 students would receive indirect services through the Specialist's Teacher Consultation Services. As with direct services, this proved to be a modest estimate, since Shubel School District contracted for part-time consultation with the Behavioral Problems Specialist. During the 1976-77 school year approximately 602 students received indirect services through this program.

Carus Title VI-B Behavior Problems Program was extremely successful in bringing about substantial behavior changes in the children who participated in the program. Below are itemized the percent decrease in deviant or inappropriate behavior according to the kind of services received. It must be understood that in many cases the goals were to increase many appropriate behaviors to take the place of the decreased or eliminated inappropriate behaviors.

> Although the Behavior Problems Specialist worked consistently with 15 children during the school year, continuous data were collected on only 9 of these children. Below are itemized the kind of behavior which was reduced or eliminated and the

percent reduction. These figures were arrived at by comparing each child's baseline behavioral levels with the behavioral levels of the same children at the end of treatment. A one month follow-up report on these children showed that gains mentioned above were maintained.

30% decrease off task
20% decrease off task
100% decrease non-compliance
100% dawdling and inappropriate office visits
98% tantrum duration
100% decrease verbal threatening leading to fight
25% reduction classroom disruptive behavior
50% decrease in late or not turned in assignments
80% reduction monthly frequency of tantrums

Mean reduction in inappropriate behavior for 9 children seen on a consistent basis = 67%.

Another indication of the changes which took place with the 9 children upon whom consistent data were collected comes from teacher perceptions of deviant behavior. To determine the amount of behavior change perceived by a child's teacher the Walker Problem Behavior Identification Checklist. was completed on 4 problem children by their teachers. The teachers of these 4 children rated each child's behavior in early October (pre-program) and again in late May (post-program). These data showed a substantial reduction in teacher perceived child behavior problems. Total pre-score mean across the 4 children was 27 and total post-score mean for the 4 children was 14. A small score on the Walker Problem Behavior Checklist shows fewer behavior problems.

A final indication of the changes that took place with the 9 children upon whom consistent data were collected was the fact that 3 of these children received school-wide recognition for outstanding citizenship. It was an extremely satisfying experience to witness what were once the worst behaved children in school, receiving these citizenship awards.

Approximately 39 children in two classrooms were involved in PASS programs. The data below represent the percent decrease in total class off task behavior. These data were determined by comparing the average of 2 days baseline on task data with the average of the final two days of treatment. Observation periods for collection were kept at a constant time each day and lasted from 20 to 30 minutes.

Percent decrease in total class off task (6th grade) = 38%
Percent decrease in total class off task (1st-2nd grades) = 69%

Mean decrease in student off task attributed to PASS programs for 39 students = 53%.

The goal of the special reading program was to reduce the reading errors of children who were considered to have mild emotional problems or learning disabilities. Table I represents the decrease in reading errors for 9 children who remained in the program for the full year. These figures were arrived at by comparing the average mistakes made daily by each child during the first week of instruction with the average daily mistakes made by these same children in subsequent weeks. When interpreting Table 1, it should be noted that the reading level of the daily stories upon which error data were collected remained at the same or slightly increased difficulty.

Another indication of the special reading program's effect on the social behavior of the participating children can be inferred from the fact that 4 of the 9 children who remained in the special reading group for the full year received outstanding citizenship awards.

Changes in teacher behavior so that behavior problem children could be maintained in the regular classroom was another objective of Carus' Title VI-B project. All treatment approaches described earlier required some changes in teacher behavior. In cases where C.O.R.B.E.H. programs or collection graphing, staffing, and feedback approaches were used, critical teacher behaviors were systematically varied until the child's deviant behavior was reduced or eliminated. Typically the teacher behaviors changed were: attention to appropriate behavior, consistent use of time out, increasing praises, decreasing negative attention, etc. At times the Behavior Problems Specialist would teach in different classrooms so as to provide a model for appropriate teacher behavior.

Contracting also required changed teacher behavior; however, these changes were kept to a minimum. No systematic data were collected on the behaviors of teachers involved in contracting.

Below are provided some data relevant to the teacher training component:

A. Advice given to all teachers in Carus and Shubel Districts = 24 teachers.

B. Direct behavioral observations were taken in 14 classrooms.

C. Six teachers were involved in individual teacher behavior change programs.

Parent involvement in Carus Behavior Problems Program was believed a necessity. To accomplish this, all parents whose children were involved in the program were contacted and their help enlisted. Parents were seen on both an individual and group basis. Groups of parents were involved through an evening class taught by the Behavior Problems Specialist which was held on five consecutive Mondays.

Below are some data relevant to parent training:

Number of parents seen individually four or more times = 10

Average attendance for four evening parent classes = 17

Number of parents seen for special reading conferences = 13

Total number of parents seen four times or more concerning behavior problems or learning disabilities = 40

All parents who sought advice about their children's behavior problems were directed to collect data on problem behaviors. A few parents, 20%, did collect data on their children. Of these parents, approximately 80% of all problems mentioned were reduced. The majority of other parents, those who did not collect data, reported their children's behavior was much improved as a result of individual or group meetings.

Third Party Evaluator's Comments:

This project not only provided excellent child change data, but also provided interesting data in regards to changes in teacher and parent behavior.

This project realized what all should be aware of when dealing with behavior problem children in the classroom, that is, that an educator will not be effective in dealing with behavior problem children unless he can effectively change the way components of the child's environment are responding to that child, namely, the teacher and parent. Often it is quite sufficient to change the way a teacher responds to a given child. For instance, getting a teacher to increase her frequency of reinforcing appropriate classroom behavior may be sufficient to decrease the frequency of inappropriate child behavior. The same can be said for the parent. Often it is not the job of the behavioral therapist to change the child's behavior as much as it is for the specialist to discreetly effect change among parent and/or teacher behaviors.

This project is complimented for providing an excellent Title VI-B project.

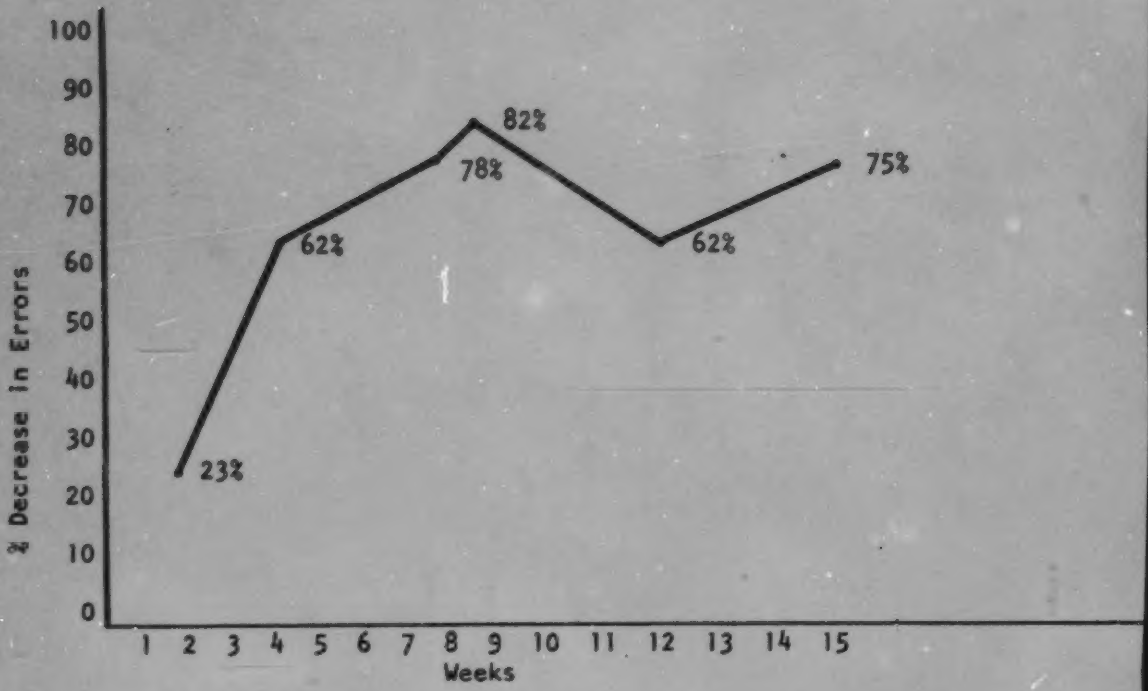


Table 1

% Decrease in Decoding Errors for 9 Special Reading Children

Title of Project: Special Preschool Home Project

Location of Project: Benton County, through Philomath School District

Population Served: Language Delayed, Specific Learning Disabled, Emotionally Disturbed Preschool Children

Funding Allocated: $9,600

Project Beginning Date: September 1, 1976

Project Ending Date: August 1, 1977

Background and Rationale:

For some time, intervention programs have existed in Benton County to serve several populations of handicapped children: homebound services for the developmentally disabled, classrooms for EMR and TMR children at elementary and secondary school levels and remedial services for public school aged children. There have been no services for language delayed, specifically learning disabled or emotionally disturbed preschool children. This project was designed to provide evaluation and intervention services to this population.

Methodology:

The primary delivery system was a home based parent education model. The parent consultant visited the home once weekly to evaluate the child's progress on prescribed programs, to prescribe and model new programs, thus assisting parents in teaching new skills to their children and in developing more effective parenting skills.

As children were referred to the project an initial visit was made with parents to gain information regarding needs of the parents and the child. Children were evaluated with the Portage Guide to Early Education Checklist. Children were also evaluated with other tools such as the

Henja Developmental Articulation Test, the Illinois Test of Psycholinguistic Abilities, the Carrow Test of Auditory Comprehension and the Purdue Perceptual Motor Test. An attempt was made through formal and informal assessment to determine the child's strong and weak modalities so that programming could utilize strong areas to remediate weak areas.

The parent consultant and parent(s) discussed strengths and weaknesses in the areas of: behavior, language, socialization, cognition, self-help and motor skills. Programs appropriate to the needs of the parents and child were written weekly. The parent consultant demonstrated the new programs and recorded baseline data after posttesting the previous week's program. Modifications in new programs were made if pretesting indicated the new prescription to be inappropriate. Parents were encouraged to contact the consultant if problems arose between visits.

Periodic group parent meetings were also held to provide a support and educational base for parents. A total of 64 parents attended the seven meetings held during the grant period. The following is a summary of the number of parents who attended and topics for each meeting:

Topic	Month	# Attending
Development of Speech, Language/Hearing	November	8
Assertiveness for Exceptional Parents	December	10
Sensory Development of the child	February	11
Discipline: Some Suggestions and Guidelines	April	10
Touching and Caring	May	8
Activities for Parents and Children	June	4
Picnic	July	13

Objectives:

1. To increase the skills of selected children in selected areas such as language, cognitive motor and self-help.

Evaluation: Collect baseline data on a specified behavior, set a criterion level of acceptable performance, design and implement a program and collect interim data.

Results: A total of 12 children were seen throughout the project year. Two children were evaluated and programming only begun when they unexpectedly moved from the community. A total of 161 skill programs were written and run by parents. Criterion levels were met on 132 programs: 58 in cognitive skills, 30 in language skills, 3 in self-help skills, 10 in socialization skills and 31 in motor skills.

It was found that some parents did not initially record data during the week. Thus the parent consultant recorded baseline data and posttest data during home visits. Attempts were made to shape parents toward data keeping and were generally successful. Table 1 is a summary of data for these programs.

2. To decrease or eliminate deviant or inappropriate behavior for selected children.

Evaluation: The behavior will be pinpointed, baseline data will be collected, a program will be designed and implemented, interim and probe data will be collected to monitor the behavior.

Results: Behavior programs were primarily designed to eliminate acting out type behavior problems including toileting and tantrumming. Some areas which could perhaps have been seen as behavior problems were looked at in terms of the child's strong and weak modalities and programs and activities designed to use the strong modality while shaping the weak, i.e., a child who had difficulty sitting for an appropriate length of time would receive programs which utilized his/her desire or need to move. At the same time, activities were implemented to attempt to increase the child's ability to sit and attend for extended periods of time. In retrospect, these could have been designed as data based programs and would have strengthened the success of Objective 2.

A total of nine behaviors for five children were pinpointed and modification programs designed. Prescriptions were sometimes modified so that a different approach or reinforcer was implemented during the period of the program. The occurrence of all target behaviors had decreased during intervention. See Table 2.

Third Party Evaluator's Comments:

Each of the objectives in this project were met. The third party evaluator recognizes the difficulty in getting parents to administer and take data on prescriptive programs. The project staff were obviously successful in their attempts to do this. Children met the criterion level of acceptable performance on 132 programs of 161 programs provided. While the data did indicate that those skills acquired in behavior management programs were maintained up to three weeks after the criterion level was met, no similar data were reported for the cognitive, language, self-help, socialization and motor skills. To have probe maintenance data on these skills would have strengthened the report made by the project staff. It should be noted, however, that these were not data that were specified from the onset of the project.

Table 1

Child	Time in Program	Total Programs	Total Criterion	Cognitive	Language	Self-Help	Socialization	Motor
1	3 Weeks	------------------ Evaluated Only: Moved ------------------------------						
2	6 Months	26	18	11	3	-	1	3
3	3 Months	4	4	--	-	-	4	-
4	6 Months	30	25	6	9	3	1	6
5	2 Months	9	7	4	3	-	-	-
6	6 Months	25	21	2	2	-	-	17
7	9 Months	48	43	24	10	-	4	5
8	4 Months	12	8	8	-	-	-	-
9	5 Months	7	6	3	3	-	-	-
10	4 Weeks	------------------ Evaluated Only: Moved to Adoptive Home --------------						
Totals		161	132	58	30	3	10	31

Table 2

Child	Time in Program	Program	# Programs Written	Base	Post Base	3 Weeks After Post
3	2 Months	1. Tantrumming	4	11/wk	0/wk	0/wk
		2. Going to bathroom without Mom	4	5/wk	24/wk	----
4	6 Months	1. Command compliance, verbal response on cue	4	25%	87%	83%
		2. Grabbing for objects	2	15/15 Min	3/15 Min	4/15 Min
		3. Grabbing faces	------ Ongoing at End of Project --------			
		4. Command compliance, playing with fireplace pokers	2	20/wk	2/wk	Parent Reports no Problems
IB	1½ Months	Toileting (soiling pants after being trained for one year)	5	9/wk	0/wk	By Phone Reported 1/wk
RL	4 Months	1. Toileting (Bowel movements in pants)	4	9/wk	2/wk	Still a slight problem in reaction to discipline from Mom
EH	3 Months	1. Toileting (Urinates and bowel movements in pants)	2	Urine 21/wk B.M. 3/wk	6/wk 1/wk	5/wk some to some 1/wk

Title of Project: Senior High Educational Resource Center

Location of Project: Phoenix School District #4, Phoenix, Oregon

Population Served: Mildly Handicapped Senior High Students (34)

Funding Allocated: $36,962

Project Beginning Date: August 1, 1976

Project Ending Date: June 30, 1977

Background and Rationale:

Within the senior high two areas of special concern to parents and educators were the lack of a continuation program for mildly to moderately emotionally disturbed students entering senior high and the lack of a continuation program for mildly handicapped children who have been mainstreamed. The Jackson County IED has sponsored a mainstreamed Resource Center model for elementary and junior high aged children for the last four years. Several of these students were of senior high age by the 1976-77 school year and needed continued services. Since there was no senior high program for such students, there was a great need for the establishment of a senior high level program so that these students could continue their school progress.

The gaps and weaknesses of the Jackson County Intermediate Education District Special Education program in Jackson County included:

a. A large number of senior high age students (17) not receiving any educational opportunities as noted by the Childfind project.

b. Senior high age students (8) who demonstrate behavior problems and extreme learning problems but who are not receiving any special education services at this time.

Methodology:

The Resource Center provided special education services based on a mainstream model to 34 mildly handicapped senior high students over the 1976-77 school year. These students were concurrently enrolled in regular classes.

Students involved included the following categories: extreme learning problems, emotionally disturbed and educable mentally retarded.

The Resource Center was staffed by a certified special education teacher and a teacher aide. The curriculum content of the program focused on assisting students through tutoring to succeed in those regular classes in which they were enrolled while also providing remedial instruction in the basic skills. For selected students, a greater emphasis was placed on vocational classes and pre-vocational skills that would assist these students to secure employment which could be remunerative. This phase of the program required a work experience teacher aide who was responsible under the teacher's supervision for providing job explorations, job-tryouts and job placements for these students. This program was tied in with the existing work experience program at the Phoenix High School.

Objectives:

1. By June 1977, all EH, EMR, ELP and physically handicapped senior high students receiving programming will have reached 75% of their stated program goals as measured by program posttests.

Evaluation: Students will be identified and enrolled. Individual objectives will be written for enrolled students with assistance from parents and the regular classroom teachers. Programs will be designed by Resource Center, students will be pretested on objectives, programs will be initiated, program data will be monitored daily, students will be posttested on objectives and the program will be phased out when the child meets the objective.

Results: A total of 185 objectives were written for 17 students. Of these, four were not posttested because of sudden withdrawals. Of the objectives posttested, 82.7% were met as stated. The range of objectives passed for individual students was 35% to 100%.

2. By June 1977, 80% of all enrolled students will spend 30% of their time in regular class activities.

Evaluation: A student roster will be maintained which specifies the amount of time in the regular classroom and in special services.

Results: 94% of the students spent at least 30% of their time in regular class activities. Time spent in regular classes ranged from 20% to 86% with an average of 69%.

3. By June 1977, 75% of selected students will demonstrate a reduction or elimination of deviant social behaviors or an increase in desirable social behaviors.

Evaluation: Baseline data will be taken on the occurrence of the behavior, a program will be designed, periodic data will be taken on the occurrence of the behavior until it reaches a desirable criterion level of acceptable performance.

Results: Nine objectives were written for social behaviors of six students. Seventy-seven percent of the objectives were met as stated.

4. By June 1977, 75% of selected students will be placed in jobs in the community on a part-time basis.

Evaluation: A record of the number of students placed part-time will be maintained. The duration of their placement will be noted. Type of placement and rate of pay will be documented.

Results: Vocational goals were set for four students. All of these students were placed and supervised in community jobs. Other ERC students worked in job placements established by the ongoing school vocational education program, which were not supervised by ERC staff.

Third Party Evaluator's Comments:

Despite the fact that this project was beset with difficulties beyond its control, it has accomplished its objectives in an admirable fashion. The project was originally located in Eagle Point High School which because of budgetary problems closed in October. In November the project was relocated in Phoenix High School. This transition from one high school to another set the project back by an estimated four months. This set-back explains why the project was only able to serve 17 children instead of the 25 for which they were contracted.

In addition, when the project was transferred to Phoenix, the project staff focused on the acquisition of skill behaviors in lieu of the remediation of inappropriate behaviors. This explains why only nine objectives were written for six students. Certainly resource centers at the high school level usually pinpoint more than nine social behaviors requiring staff intervention.

Neither of these comments -- the lesser number of children served and the small number of behavior programs -- should be considered critical of the project. On the contrary, that the project was able to serve 17 children in a new high school in only five months demonstrates the high degree of professionalism contained in this staff. Less professional staff would have floundered faced with the task of transferring the project from a high school prepared to interact with the project to a high school not prepared either with facilities or with a regular staff exposed to the operation of a resource center within its environment.

Title of Project: Mainstreaming Exceptional Children

Location of Project: Pleasant Hill Junior High School
Pleasant Hill, Oregon 97401

Population Served: 15 Students with Emotional, Behavioral and/or Academic Problems

Funding Allocated: $20,000

Project Beginning Date: July 1, 1976

Project Ending Date: June 30, 1977

Background and Rationale:

The Pleasant Hill School District No. 1 is located in the southern tip of the Willamette Valley, about a ten-minute drive from Eugene, Oregon. The District covers an area of 113 square miles with an estimated population of 5,000 persons. The majority of the populace either drives into Eugene for employment or works in the forest products industries in Oakridge or the Cascade Mountain Range east of the school district. The school district has only limited financial support from industry and depends almost entirely upon local property taxes for support.

The educational system of the district follows a 3-3-2-4 plan with a total of 1378 students and 91 certified staff members involved. Within this student population, 312 students are currently enrolled in the Primary School, 340 in the Elementary School, 233 in the Junior High School, and 500 in the High School. It is the belief of the district that the development of a person's perceptions of himself is a continuing process which requires constant focus on the relevant experiences throughout his entire life. Therefore, it is the responsibility of the district to recognize the needs of the individual and provide an instructional program consistent with that need.

A 1973-74 survey of the Pleasant Hill School District educational program indicated a specific need at the elementary school for an intensive program for students with emotional/behavioral problems and/or learning disabilities. During 1974-75 and 1975-76 school years, Title VI, ESEA project funded a behavioral/emotional modification program and an intensive instructional program to alleviate most deviant behavioral problems at the Pleasant Hill Elementary School. The Pleasant Hill School District saw a need to extend the concept into the Pleasant Hill Junior High School, grades 7-8. The Junior High program was implemented in August, 1976.

Methodology:

Project Staff: The project teacher has four years of teaching experience in special education, a Bachelor of Science Degree in Special Education, and a Basic Teaching Certificate.

The project aide has three years aide experience. She worked with children with specific reading problems. She acquired knowledge of child development and behavioral and disciplinary techniques through inservice training.

Project Description: The resource room was designed to implement an instructional program to remediate specific problems through concentrated individual and/or small group instructional sessions. Students attended regular classrooms for all subjects except language arts and math which were attended in the resource room. One of the fifteen students was also provided social studies instruction in the resource room. Both the language arts and math blocks were approximately fifty minutes long. The resource room was equipped with casette tape recorders, a component stereo system, a listening station with filmstrip/cassette projectors, and study carrels.

Each student had a box in which they stored their room folders, textbooks, workbooks, and any extra material needed for their daily lessons. Student folders contained a daily assignment worksheet, a guideline card, and a behavioral objective card.

Each student could receive a maximum of four points per class by completing all of his assignments and meeting designated behavioral objectives. Each student earned a point quota in limited blocks of time which were rewarded with films and class field trips. Negative behavior resulted in a loss of points and therefore a loss of class rewards. Students had an opportunity to earn bonus points. After earning ten bonus points, a student could take free class time to watch incentive filmstrip programs or play games on the computer. Students were graded on work accomplished regardless of the amount of help received from the project teacher or project aide.

In addition to individualized instruction and behavior modification, one of the unique qualities of the room was stereophonic music playing continually. This aided in drowning out extraneous noises and therefore improving concentration. Most musical selections were instrumental, soft, and relaxing.

Objectives:

1. To change the behavior of the socially maladjusted, emotionally disturbed child so that he can function adequately in a regular classroom.

Evaluation: Pinpoint the behavior, collect baseline data in the regular classroom, design and implement a prescriptive program. Goals will be set by students, the regular classroom teacher and the Title VI-B staff member. Data pertaining to the specified child behavior will be collected in the resource room and in the regular classroom when the child returns to this setting.

Results: The initial procedure for the resource room included a referral form and a behavioral checklist designed by the project teacher. The regular classroom teacher used these to state the nature of the problem and rate behavioral characteristics. The project teacher and aide then observed the student in the classroom of the referring teacher, an elective classroom setting, and an activity class such as physical education, art, etc. Two fifteen minute observations were made at random during each class. During observations, both positive and negative behaviors of the student were recorded and descriptive notes were written at the bottom of the observation form. The project teacher then met with the principal and a decision was made concerning further testing. A permission slip signed by the parents initiated the process of screening and testing. The project teacher assessed each pupil's level of achievement and self concept through the use of a variety of formal and informal diagnostic procedures.

A general criterion for acceptance into the program was achievement level two years behind grade level. A review committee, including the principal, school nurse, counselors, project teacher, referring teacher, and any other professionals concerned with the child's educational growth, determined whether the child was eligible for placement in the resource room or should remain in the regular classroom. If the child was considered appropriate for the resource room, a conference was scheduled between parents and project teacher. Written parental consent was obtained for the child to attend the class. A separate conference took place between the student and the project teacher in which the project teacher explained why the student was entering the class, the purpose of the class and the expectations of the student. After the student entered the resource room, baseline was established and observations were made every nine weeks to measure progress.

Regular classroom teachers were generally concerned with the student's off-task behavior and/or whether the student completed assigned work. Consequently, regular classroom teachers agreed to accept the student back into the regular class when he was on-task 80% of the time and/or completing 80% of his assigned work. Table 1 presents the baseline and quarterly observations for each school quarter students were in the resource room. Only for student 11 did baseline observations reveal the student to be on-task and completing assigned work over 50% of the time. Other students were exhibiting considerably lower rates of appropriate task-oriented and work completion behavior. Also indicated in Table 1 is a consistent increase in more appropriate behavior with increasing amounts of time students spent in the resource classroom. Students 3, 4 and 5 were placed back into the regular classrooms during the fourth quarter of school and quarterly observations were thus made in the regular classrooms. For each of the students placed back in the classroom, on-task behavior was observed to be at or above 80% during the fourth quarter observation, indicating that the appropriate behaviors acquired in the resource room were maintaining in the regular classroom.

2. To increase the academic skills of twelve children in the areas of reading and math.

Table 1

Percentage of Task-Oriented Behaviors During Observations in the Resource Room

Student	Student Behaviors	Baseline	1st 9 Weeks	2nd 9 Weeks	3rd 9 weeks		4th 9 weeks
1	On task - math	28%	40%	46%	76%		90%
	Completing assignment - math	15%	20%	33%	12%		60%
	On task - language arts	40%	40%	50%	44%		90%
	Completing assignment - L.A.	28%	20%	40%	46%		80%
2	On task - math	20%	30%	34%	72%		80%
	Completing assignment - math	20%	25%	48%	66%		76%
	On task - language arts	10%	25%	50%	57%		66%
	Completing assignment - L.A.	10%	15%	28%	23%		70%
3	Independent work - math	23%	33%	36%	70%	80%	85% reg. class
	Independent work - L.A.	28%	30%	48%	53%	80%	80% reg. class
4	On task - language arts	10%	20%	20%	46%	70%	63%
	On task - social studies	15%	50%	73%	80%		80% reg. class
5	On task - math	30%	50%	65%	82%	76%	80% reg. class
	Completing assignment - math	15%	25%	50%	50%	76%	76% reg. class
	On task - language arts	40%	40%	50%	64%	76%	96%
	Completing assignment - L.A.	50%	60%	64%	64%	80%	96%
6	On task - math	25%	30%	42%	Withdrawn from school		
	On task - language arts	15%	20%	36%			

Table 1, Continued

Student	Student Behaviors	Baseline	1st 9 Weeks	2nd 9 Weeks	3rd 9 Weeks		4th 9 Weeks
7	Independent work - math	30%	46%	60%	62%		Withdrawn from school
	On task - math	50%	60%	70%	75%		
	Independent work - L.A.	20%	33%	46%	50%		
	On task - language arts	35%	50%	60%	56%		
8	Independent work - math	50%	-	72%	80%		90%
	On task - math	45%	-	65%	50%		93%
	Independent work - L.A.	40%	-	74%	60%		96%
	On task - language arts	45%	-	74%	60%		96%
9	On task - math	43%	-	-	62%	60%	70%
	On task - language arts	40%	-	-	66%	50%	73%
10	On task - math	45%	-	-	80%	76%	63%
11	On task - math	50%	-	-	60%	56%	73%
	Independent work - math	47%	-	-	53%	66%	76%
	On task - language arts	60%	-	-	66%	66%	66%
	Independent work - L.A.	55%	-	-	64%	60%	93%
12	Completing assignment - math	50%	-	-	66%	60%	70%
13	Completing assignment - math	50%	-	-	74%	Withdrawn from school	
14	On task - math	37%	-	-	43%	25%	80%
	On task - language arts	40%	-	-	44%	63%	73%

Table 1, Continued

Student	Student Behaviors	Baseline	9 Weeks	9 Weeks	9 Weeks	9 Weeks
15	On task - math	50%	-	-	86%	86%
	Completing assignment - math	30%	-	-	90%	43%

Evaluation: The Key Math Test and the Woodcock Reading Inventory will be administered to each child on a pre- posttest basis.

Results: The Key Math and the Woodcock Reading Mastery Tests were used during each student's initial diagnostic screening as a placement instrument. The Peabody Individual Achievement Test (PIAT) was administered on a pre- posttest basis.

Students 1 through 7 were the original class members and were tested in September, 1976. The other students were pretested at various times throughout the year, depending on time of entry into the resource room. A middle of the year evaluation took place in January, 1977; posttesting occurred during the last two weeks of May.

Table 2 presents the results of the various PIAT administrations to each of the 15 students accepted into the resource room. Three of the 15 students withdrew from school during the academic year, with only one of the students having two PIAT administrations for gain comparisons. Of the 11 students who had two or more PIAT administrations and to whom math was taught to them in the resource room, 8 students demonstrated high math sub-test scores on subsequent PIAT testing than they had at entry into the resource room. Some of the math gains were substantial, in excess of four years growth during the school year. A total of 10 students had more than one PIAT administration and had reading taught as one of their resource room subjects. Of these 10 students, each student scored higher on reading sub-test of subsequent PIAT administrations than they had at the time of their entry into the program. Again, some children demonstrated considerable gains, often in excess of 4 to 5 years skill gains during the academic year.

Table 2

Pre- and Posttest Results of the Peabody Individual Achievement Test

Student	Sub-Test	Test #1	Test #2	Mid Term Results	Test #3	Semester Results	Final Results
1		9-20-76	1-24-77		5-31-77		
	Math	4.2	6.0	+1.7	7.6	+1.6	+3.4
	Reading Recognition	5.8	6.6	+ .8	6.0	- .6	+ .2
	Reading Comprehension	4.7	5.5	+ .8	8.4	+2.9	+2.7
2		9-20-76	1-21-77		5-24-77		
	Math	9.2	8.9	- .2	11.3	+2.3	+2.1
	Reading Recognition	8.1	9.1	+1.0	9.8	+ .7	+1.7
	Reading Comprehension	7.2	10.0	+2.8	10.7	+ .7	+3.5
3		9-20-76	1-19-77		5-26-77		
	Math	9.9	7.9	-2.0	10.3	+2.3	+ .4
	Reading Recognition	6.2	7.9	+1.7	7.3	- .6	+1.1
	Reading Comprehension	5.3	7.2	+1.8	8.1	+ .8	+2.7
4		9-22-76	1-24-77		5-26-77		
	Reading Recognition	5.0	7.0	+2.0	9.1	+2.1	+4.1
	Reading Comprehension	4.7	9.5	+4.7	10.2	+ .6	+5.4
5		9-24-76	1-17-77		5-25-77		
	Math	7.0	7.4	+ .4	7.6	+ .2	+ .6
	Reading Recognition	6.2	8.1	+1.9	6.4	-1.6	+ .2
	Reading Comprehension	5.0	12.8	+7.8	10.2	-2.6	+5.2

Table 2, Continued

Student	Sub-Test	Test #1	Test #2	Mid Term Results	Test #3	Semester Results	Final Results
6		9-21-76					
	Math	8.6					
	Reading Recognition	5.3	Withdrawn from school				
	Reading Comprehension	5.2					
7		9-23-76	1-24-77				
	Math	7.0	7.0	0			
	Reading Recognition	8.1	9.1	+1.0	Withdrawn from school		
	Reading Comprehension	7.8	9.8	+2.0			
8		10-11-76	1-17-77		5-25-77		
	Math	4.9	5.3	+ .3	8.9	+3.6	+4.0
	Reading Recognition	6.6	9.1	+2.4	8.9	- .1	+2.3
	Reading Comprehension	5.3	6.5	+1.2	8.4	+1.8	+3.1
9			12-15-76		5-24-77		
	Math		5.3		9.2		+3.8
	Reading Recognition		5.2		6.2		+1.0
	Reading Comprehension		3.9		6.5		+2.6
10			12-02-76		5-31-77		
	Math		4.6		7.0		+2.4

Table 2, Continued

Student	Sub-Test	Test #1	Test #2	Mid Term Results	Test #3	Semester Results	Final Results
11			12-1-76		5-25-77		
	Math		5.3		7.0		+1.7
	Reading Recognition		4.0		5.6		+1.7
	Reading Comprehension		6.8		7.8		+1.0
12			11-23-76		5-31-77		
	Math		4.2		8.4		+4.2
13			11-18-76				
	Math		9.6		Withdrawn from school		
14			10-04-76		5-24-77		
	Math		6.7		5.7		-1.0
	Reading Recognition		6.6		7.9		+1.3
	Reading Comprehension		3.3		7.2		+3.9
15			3-17-77		5-27-77		
	Math		4.9		4.4		- .5

3. To decrease the number of hours per day throughout the year that the child is spending in the resource room.

Evaluation: A log will be maintained on the number of hours the child spends in the regular classroom.

Results: A weekly log was kept on each child that entered the resource room. Table 3 presents a summary of that log. There were seven original class members who started during week 1 (October). Student 8 entered the class during the first of November. Students 9-14 entered during the month of January. The final student, number 15, entered during April.

Student 4 returned to his regular social studies class during the 17th week of school, but continued in the resource room for language arts. Student 3 returned to the regular math class during week 18. For the following two weeks she would return to the resource room during art or chorus for about fifteen minutes each day to receive extra help in math assignments. Student 5 returned to regular math class during week 25. Follow-up was smooth the first week. The second week the project staff spent half of the class time tutoring the student, rearranging his class environment, and encouraging a peer-tutor situation. Student 3 returned to regular language arts class during week 26. It should be noted that she was the only student to be fully mainstreamed into the regular classes.

All the other students met the objectives established for them, but were not yet ready for regular class placement. Project staff believed that students 2, 8, and 14 were potentially ready for mainstreaming into one or both regular classes. However, the factors of adjustment time and the lateness of the school year resulted in postponed

Table 3

Hours Spent in Resource and Regular Classrooms Per Week[1]

	Beginning of School Year		End of School Year	
Student	Hours Per Week in Resource Room	Hours Per Week in Regular Room	Hours Per Week in Resource Room	Hours Per Week in Regular Room
1	8.5	21.0	8.5	21.0
2	8.5	21.0	8.5	21.0
3	8.5	21.0	0	29.5
4	8.5	21.0	4.3	25.2
5	8.5	21.0	4.3	25.2
6	8.5	21.0	Withdrawn from school	
7	8.5	21.0	Withdrawn from school	
8	8.5	21.0	8.5	21.0
9	8.5	21.0	8.5	21.0
10	4.3	25.2	4.3	25.2
11	8.5	21.0	8.5	21.0
12	4.3	25.2	4.3	25.2
13	4.3	25.2	Withdrawn from school	
14	8.5	21.0	8.5	21.0
15	4.3	25.2	4.3	25.2
AVERAGE	7.4	22.1	6.3	23.2

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[1] The total possible number of school hours per week was 29.5.

mainstreaming. Overall transition of the students that were mainstreamed was favorable among project staff and regular classroom teachers.

4. To change the behavior of selected parents.

Evaluation: Data will be collected on the ability of the parents to design and implement a program for a specified behavior.

Results: In December a letter was sent to all parents of the resource room students explaining the parent training service that was available to them. The following week a meeting was held between the project teacher and 50% of the students' parents. A behavioral modification program was presented to the parents at this meeting. Each parent expressed a need for such a system in the home, since many parents indicated they had tried "everything" but were still experiencing problems with their children. As the response was favorable, parent 1 volunteered her home background and specified behaviors she wished her child would learn or behaviors she wished to eliminate. Several particular areas were pinpointed by the parents. The example behavior pinpointed in the meeting was to have the child accomplish the task of brushing his teeth voluntarily before bedtime. A hypothetical baseline was set and the goal to be reached was five days each week. A chart was drawn up and reinforcements were decided on (in this case television was the reinforcement). Discussion was held on the responsibility of the parents to carry out the program in the home.

Two parents set up individual meetings the following week and a program was designed for their situations. Parent 2 indicated that she wanted her child to stop teasing and arguing with a younger sister. Parent 3 pinpointed the behavior of having the child follow directions and task requests by the parents.

Three weeks following the initial meeting the project teacher contacted the parents by telephone. Parents 1 and 3 reported that they had carried out the program and the results were moving in a positive direction. Parent 2 reported that she had not kept up the reduced teasing program and an appointment between project teacher and parent was made. Parent 2 did not attend the meeting. During school-parent conferences in February, both parents 1 and 3 reported that the program had worked. They had discontinued the system and their children were consistent in their behaviors. Hard data were not returned by the parents but the project teacher felt the program intervention was a success for parents 1 and 3.

Third Party Evaluator's Comments:

Of the four project objectives, the one that was most successfully achieved was the objective (number 2) that focused on producing math and reading gains in students. Of the 13 students for whom results from two administrations of the Peabody Individual Achievement Test (PIAT) were available, 12 made gains in reading and/or math areas. Closely attuned with this accomplishment was the project's success in developing more appropriate study habits of the students. Most students served in the project's resource room were referred and subsequently accepted because they exhibited little task orientation during regular classroom activities and had poor records of completing assigned work. The observational data obtained as baseline and quarterly checks revealed a consistent increase in those appropriate academic skills over the year. Additional successes of the project included placement of three students back into the regular classroom for instruction in certain subjects that had previously been taught in the resource room. Further, the responsiveness of two to three parents to identify and work on problem areas of their children in the home was apparently successful, as reported by those parents.

Collectively, then, it appears that the resource room project did, demonstratively, achieve at least three of its stated objectives. However, the evaluation of the project could have been much tighter if the project had followed through on the following points. First, baseline observation data of children served in the resource room should have been collected and reported for the regular classroom rather than the resource room. The most important comparison would have been how much better students attended to tasks in regular class than in the resource room. However, generalization appears to have been occurring in the three instances in which students were returned to the regular classroom. Second, it would have been more useful for task-oriented and assignment completion data to have been collected more frequently than once each quarter. Advantages might have been alterations of instructional plans if a student was not on-task and completing assignments; or, placement in regular classes if attending to and completing assigned work. Third, parents interested in running specific programs for their children at home should have been more aggressively approached and attempts made to get cooperating parents to maintain and report program effectiveness data for the teacher to review and suggest alterations as necessary. Although the global responses of the three parents suggests the project may have met the fourth objective, the lack of parental intervention data disallows acceptance of meeting this objective.

Title of Project:	Early Prescriptive Intervention for Children
Location of Project:	Parkrose School District #3
Population Served:	13 Developmentally Delayed 4-Year Olds (Plus selected elementary school age children)
Funding Allocated:	$45,000
Project Beginning Date:	September 1, 1976
Project Ending Date:	June 15, 1977

Background and Rationale:

The Parkrose Schools noted a high incidence of handicapped children among its kindergarten population. The children presented problems with communication skills, visual-motor integration, gross motor development, and behavioral control. Further, the District noted a continuing high rate of referral to its specialized support personnel.

The continued high rate of diagnosed learning disabilities and/or referral for all specialized support services, especially among the kindergarten population, suggested that there was a significant number of preschool children who would benefit from early identification and intervention efforts to ameliorate the effects of their handicaps. Consequently, a major gap identified in the Parkrose program was the identification of and intervention with preschool handicapped children.

Methodology:

The District established an educational program for handicapped preschool children and selected five year old children who had been withdrawn from kindergarten. This program included an individualized classroom for the most significantly delayed children, parent training projects, and consultive and prescriptive services to other District personnel. The

District organized a team, known as the Early Prescriptive Intervention for Children (EPIC) Team, which consisted of one intervention specialist, acting as coordinator; one teacher; and two team assistants.

The EPIC Team located children above the age of three years with developmental lags in one or more of five skill areas:

1. communication and language;
2. gross-motor development
3. visual-motor integration;
4. activities of daily living, self-help skills; and
5. socialization.

The Team established a developmental training center in a classroom setting of one school which served 13 substantially delayed children. The children attended the classroom program four days per week for up to four hours each day. While at school, the children participated in individualized multi-modality learning station tasks to improve their visual-motor integration, direction following, and cooperative behavior. They also participated in informal group language experiences. Formal curricular programs included Distar Language, Monterey Language Program, Total Articulation Battery (TAB), Developing Understanding of Self and Others (DUSO), and the Frostig Visual-Perceptual Program.

Home training programs were arranged for children in the classroom and for other less handicapped children, whose only contact with the Team was through the home training programs. At weekly appointments, Team members demonstrated tasks with the child, taught the parent to implement a similar developmental task at home, and planned for the next meeting. In addition, parents received instruction in the areas of child development, reinforcement theory, and identifying characteristics of various handicapping conditions.

Part of the Team provided prescriptive intervention plans for elementary school children. To accomplish this, the Team members implemented the Program for Academic Survival Skills (PASS) and the Contingencies for Learning Academic and Social Skills (CLASS).

Objectives:

1. Handicapped preschool children and selected others will demonstrate their various levels of development.

Evaluation: The number of children screened and to what program they were referred and placed will be recorded and reported.

Results: Table 1 summarizes the number of children referred to the EPIC Project, the evaluative instruments used in screening children, and the resultant disposition of those children following screening. The Peabody Picture Vocabulary Test (PPVT), the Beery-Buktenica Visual-Motor Integration (VMI) test, and the Denver Developmental Screening Test (DDST) were given to the preschool and kindergarten children. Selected children were given other tests, as the need dictated. Other tests used included the Beery-Muncy Articulation Test (BMAT), Program Conditioning Language Test (PCLT) of the Monterey Language Program, and the Sequenced Inventory of Language Development (SILD). Observation was the major evaluative tool with the older children because most of these referrals indicated a need for help with behavior problems in the classrooms. The majority of referrals were serviced by the EPIC Team. This service offered several options including: enrollment in the EPIC classroom, intervention in the home, planning and implementing a program in an elementary classroom and/or consultation with teachers and support personnel.

As evidenced by Table 1, a total of 60 children were referred to, screened by, and referred on to an appropriate educational program by the EPIC staff. A total of 154 test administrations were used across these 60 children, with 34 of those children also observed in the classroom environment as part of the screening process. Of the total children screened, 33 were referred for placement in the EPIC prescriptive intervention classroom, 28 were referred for placement in other Parkrose school programs, and two children were referred to other community agencies. Of the 60 children screened and referred, 49 were accepted by the programs to which they were referred.

2. To provide consultation services to classroom teachers regarding specific children.

Evaluation: Data will be recorded and reported as to the change of the selected behavior.

Results: The PASS was selected as an intervention methodology because it appeared that the most efficient means of altering the children's behavior was to provide the teacher with increased skills in behavior management. The PASS program gives the teacher training and assistance in establishing appropriate antecedent factors, such as classroom rules; in pinpointing and measuring the occurrence of behaviors; and in applying positive social and activity consequences to accelerate desired behavior rates. In addition, the skills which the teacher learns in the PASS program benefit the entire class, not just the targeted child.

The EPIC coordinator also acted as the coordinator of the local PASS program. In this capacity, the EPIC Team aided 12 elementary counselors in implementing the PASS methodologies in other classrooms, impacting on 300 children. In addition, the EPIC Team members acted as direct PASS consultants to six classroom teachers, impacting on another 150 children.

Data collected across the six classrooms to which the EPIC staff consulted indicated that following 17 days of implementation of the PASS procedures in the six classrooms, all children in these classrooms were exhibiting appropriate "academic survival skills" at least 88% of the time.

Teachers using the PASS program were instructed to give attention to appropriate behavior, i.e., to use social reinforcement following demonstrated survival skill rules by children. The consultant noted the incidence of teacher social consequation of appropriate and inappropriate behavior. The teacher's goal in the program was to consequate appropriate behavior at the rate of .8 to 1.0 per minute and to consequate inappropriate behavior at the .01 rate. Teacher observation data suggested that the teachers were successful in learning to consequate appropriate behavior. However, they were only marginally successful in reducing their rate of consequating inappropriate behavior.

3. To reduce or eliminate undesirable behaviors as identified by parents.

Evaluation: Data will be collected on individual programs conducted by parents. The results will be recorded and reported.

Results: Both children and parents participated in home programs in behavior management and developmental training activities areas. However, in the behavioral area the data are not reliable because it was discovered that frequently the baseline behavior was not defined with sufficient clarity. As a result some baseline counts are unrealistically high, others low.

Table 2 summarizes the response to the parent administered programs designed to increase appropriate behavior. It should be noted that the "months child in program" column represents the total time the child was a recipient of EPIC services. For some children this will include time in the EPIC classroom as well as time in only a home program. The data indicate that 50% of the parents who initiated a home behavioral program were successful in conducting one or more programs with their children. Of the three remaining parents, two influenced the desired behavior change, but the program was not deemed totally successful by EPIC staff.

Table 3 presents the pretest, posttest, and total difference scores for EPIC children in home programs for developmental training activities as measured by several standardized instruments. Of the 12 EPIC children whose parents administer home programs in developmental training activities, all but two demonstrate increases in the skill areas for which programs were administered. Subsequently, during or at the close of the school year, 9 of 11 parent administered programs were terminated as successful, indicating parental ability to influence their children's skill acquisition.

4. Identified handicapped children will demonstrate a diminished difference between their developmental and chronological age levels.

Evaluation: Progress data for all children will be recorded and reported in selected areas of communication, motor, self-help, social, and visual-motor integration.

Results: Table 4 summarizes the pretest and posttest data for the children in the EPIC classroom. It should be noted, however, that the Distar Language Continuous Test Data are not actually pre and post; the test was originally given in April and readministered in June for year-end evaluation and preparation of a data base for Fall 1977 programs.

The data suggest that 80% of the children in the EPIC classroom accelerated their rate of development in both communication and visual-motor integration. In addition, 53% (7 of 13) gained in gross motor development as measured by the DDST. Only 15% (2 of 13) demonstrated gain in the personal-social test items of the DDST. Self-help skills were not measured specifically except for selected items from the DDST. During the program, self-help skills were taught by reinforcing behaviors such as hanging up coat, zipping pants, buckling belts, cleaning up after use of the toilet, and appropriate eating behavior. The staff noted that as the program progressed the children appeared to need fewer prompts to hang up their coats and hats. Children quickly learned to button and zip for themselves after toileting. The exception to independent toileting was a child who progressed to the point of announcing his need to use the toilet, and a second child who learned to request help rather than unintelligibly shouting for assistance.

More detailed examination of Table 4 indicates that the greatest child gains were made in the communication and visual-motor integration areas. The EPIC staff believed that gains in these areas are most appropriate since the project was undertaken to reduce such deficits (see Background and Rationale). The test data showing only change gain in gross motor development and only minimal gain in personal-social skills present some concern. The staff's subjective evaluation indicated greater growth in both areas. The children's demonstrated ability to maintain appropriate behavior in a variety of settings argues for increased social development. Unfortunately, more sensitive measures than the DDST--admittedly a screening test--were not utilized. EPIC staff believe a more sensitive measure would have shown greater gain. Despite such shortcomings, the data do reflect the emphasis of the program: communication and visual-motor development.

Third Party Evaluator's Comments:

The evidence of program impact submitted by the EPIC staff is substantial. Specifically, data have been presented to demonstrate that the EPIC program influenced the behavior of school counselors, regular classroom teachers and children, as well as the EPIC classroom children and some of these children's parents.

The EPIC project was funded to perform four basic tasks: (1) screen and refer children on to appropriate sites for educational intervention; (2) provide consultation to other educational personnel in the district; (3) assist/train parents to eliminate undesirable behaviors in their children; and (4) reduce the developmental lag demonstrated by the children served in the EPIC classroom. It is the opinion of the evaluator that the project was successful in achieving all four of the intents of the program. Specifically, a total of 60 children were screened and referred on, with 49 of those children accepted by the programs to which they were referred. Consultation was provided to 6 regular classroom teachers and 12 school counselors with subsequent impact on 450 children. Further, 6 parents were involved in administering home behavior programs, 4 of these parents reporting data demonstrating behavioral improvement; 12 parents administered skill development programs to their children, with all but two home programs terminated as successful in the judgment of EPIC staff.

With regards to the fourth intent, reducing the developmental delay by EPIC classroom children, the PPVT data clearly indicate that 11 of 13 children enrolled in the EPIC classroom scored a greater number of months on the PPVT, from pretest to posttest, than months they were enrolled in the program. The VMI test also showed a similar increased rate of development for 11 of 13 EPIC classroom students. Since the major focus of the project included the areas of communication and visual-motor integration, the data indicate that the fourth objective was achieved, at least with respect to these two particular developmental areas. Although the remaining data submitted by the project for EPIC students are not of the developmental (age equivalent) form, those data do suggest that some skills were indeed gained in the areas of gross motor and personal-social skills.

In summary, the EPIC project is viewed as having largely achieved its intended outcomes. The selection of the PASS and CLASS methodologies by the project staff has not gone unrecognized by this evaluator; both of these strategies for classroom management and academic skill development have proven successful in many settings. Thus, the EPIC project is viewed as one of several quality programs provided by the Parkrose Schools for their handicapped children.

Table 1

Children Screened and Disposition Following Screening

Code No.	Screening Instruments								Referral			Accepted	
	PPVT	BMAT	PCLT	DISTAR	SICD	VMI	DDST	OBSERVAL	EPIC	Parkrose Distri t	Community Agency	Yes	No
1	X	X		X	X	X	X		X			X	
2	X		X	XH, Walker		X	X	X	X		X	X	
3	X	X	X	X		X	X		X			X	
4	X	X	X	X		X	X		X			X	
5	X		X	X		X	X	X	X			X	
6	X	X	X	X		X	X		X		X	X	
7	X	X	X	X		X	X	X	X			X	
8	X	X	X	X		X	X		X			X	
9	X		X			X	X	X	X	X		X	
10	X	X	X	X		X	X		X			X	
11	X	X	X	X		X	X		X			X	
12	X		X			X	X		X			X	
13	X	X	X	X		X	X		X			X	
14	X	X	X	X	X	X	X	X	X			X	
15	X	X				X	X	X	X			X	
16	X					X	X	X	X			X	
17	X					X	X		X				X
18	X					X		X		X		X	
19	X					X	X		X				X
20	X			Gilmore		X		X		X		X	
21	X					X	X		X			X	
22	X					X	X		X				X
23	X					X	X		X				X
24	X					X	X		X				X
25	X								X				X
26									X				X
27								X		X		X	
28								X		X		X	
29	X					X	X		X				X
30									X				X
31								X		X		X	
32	X							X		X		X	
33	X		X				X	X		X		X	
34	X	X	X			X	X			X		X	
35	X	X				X			X				X
36								X		X		X	
37										X		X	
38	X		X			X		X		X		X	
39	X	X	X			X	X		X			X	
40	X	X	X			X	X		X			X	
41	X	X	X			X	X	X	X			X	
42	X	X	X			X	X	X	X			X	
43								X		X		X	
44								X		X		X	
45	X					X	X		X			X	
46	X					X	X		X			X	
47								X		X		X	
48								X		X		X	
49								X		X		X	
50								X		X		X	

Table 1 continued

Code No.	Screening Instruments								Referral			Accepte	
	PPVT	BMAT	PCLT	DISTAR	SICD	VMI	DDST	OBSERVAL	EPIC	Parkrose District	Community Agency	Yes	No
51								X		X		X	
52								X		X		X	
53								X		X		X	
54								X		X		X	
55								X		X		X	
56			X					X		X		X	
57								X		X		X	
58								X		X		X	
59								X		X		X	
60								X		X			X
TOTALS 60	37	17	21	12	2	34	31	34	33	28	2	49	11

Table 2

Response to Home Program in Behavior Management

Parent #	Months Child in Program	Behavior	Pre Program Level	Post Program Level	Successful		Unsuccessful	
					Terminate	Ongoing	Terminate	Ongoir
1	6	Praise for effort or achievement	0	1/min.				
2	5	Whining	66/day	7/day			X Not enough parent follow through	
		Complete daily and weekly tasks	0 No responsibilities	Successful completion 5 of 6 weeks	X			
		Institute family council, establish agenda, share responsibilities	0					
3	5	*CLASS program parent to praise for appropriate school behavior	72 points	103 points	X			
4	1	Compliance with parent commands	25%	NA			X(Mom did not report)	
5	2	Institute family council	0	1 weekly	X			
		Mom not intervene in sibling arguments	63%	72%		X		
6	6	Compliance with commands	65%	85%			X (Mother ill)	

*Contingencies for Learning Academic and Social Skills

Table 3

Pre and Posttest Data for EPIC Children in Home Programs
Response to Home Programs in Development

Parent by No.	Months In Program	Type of Program																										
		Communication											Visual-Motor					Gross-Motor										
		PPVT			PCLT			BMAT			Training Received		VMI			Training Received		DDST			Training Received		Successful		Unsuccessful	
		P	PO	D	P	PO	D	P	PO	D	Yes	No	P	PO	D	Yes	No	P	PO	D	Yes	No	Term.	Ongoing	Term.	Ongoing
1	7	38	52	14							X		49	57	8	X		In	Ad	+		X	X			
2	8	49	57	8	23	77	54	84	87	3	X		49	56	7		X					X	X			
3	3												38	52	14	X		In	Q	+		X				
4	1	36	39	3							X		46	52	6	X		Q	Q	0		X	X			
5	5												38	49	11	X		In	Ad	+	X		X			
6	4				45	84	39				X												X			
7	6	41	44	3									0	52	52	X		In	Ad	+	X		X			
8	1	63	NA	-	22	NA	-	90	NA	-	X														X	
9	8	57	62	5	65	85	20	77	90	13	X		53	63	10		X						X			
10	2	63	48	-15							X		63	63	0		X								X	
11	2	51	55	4							X		56	59	3		X						X			
12	6	52	59	7							X		56	46	10		X						X			
Total Average	4.4	50	52	2	39	82	43	84	89	8	9		50	55	5	5	5			4	2	4	9		2	

Note: PPVT results given in months
PCLT results given in % correct
BMAT results given in % correct
VMI results given in months
DDST results given by category as follows:
Ad = adequate development
Q = questionable development
In = inadequate development
Un = untestable

P = pre test data
PO = post test data
D = difference between pre and post test data

Table 4

Pre and Posttest Data for EPIC Classroom Children

Code No.	Months in Program	Communication Program												Distar			Visual-Motor Integration			Gross-Motor Coordination			Personal-Social Skills		
		PPVT			BMAT			PCLT-1			PCLT-2			Lang. I			VMI			DDST			DDST		
		P	PO	D	P	PO	D	P	PO	D	P	PO	D	P	PO	D	P	PO	D	P	PO	D	P	PO	D
1	2.5	0	27	27	37	NA	-										0	34	34	In	In	0	In	In	0
2	7	65	68	3				84	91	7	53	67	14	16	16	0	57	72	15	Ad	Ad	0	Ad	Ad	0
3	7	41	54	13	64	84	20	61	97	36	22	76	54	20	22	2	60	67	7	In	Ad	+	Ad	Ad	0
4	5	41	44	3										0	5	5	0	52	52	In	Q	+	Q	Ad	+
5	5	57	66	9													38	49	11	In	Q	+	Ad	Ad	0
6	7.5	32	47	15	61	67	6	78	83	5	27	29	2	0	3	3	38	54	16	In	Q	+	Ad	Ad	0
7	7.5	41	65	24	46	52	8	40	91	51	11	60	49	2	2	0	52	49	-3	Q	Q	0	Ad	Ad	0
8	7	33	41	8				16	75	59	7	29	22	12	12	0	36	52	16	Q	Ad	+	Ad	Ad	0
9	5.5	55	80	25	90	93	3	72	98	26	50	91	41	1	11	10	36	57	21	In	Q	+	Q	Ad	+
10	4	27	40	13	87	81	-6										16	NA	NA	In	In	0	In	In	0
11	7	48	87	39	85	93	8	74	88	14	27	56	29	0	11	11	38	52	14	In	Q	+	Ad	Ad	0
12	4	36	48	12	88	93	5	88	96	8	47	77	30	1	11	10	49	52	3	In	In	0	Ad	Ad	0
13	2	71	80	9													63	72	9	Ad	Ad	0	Ad	Ad	0
Total Average	5.5	42	58	15	70	80	10	64	90	26	31	61	30	9	10	1	37	55	18			7			2

Note: PPVT results given in months
BMAT results given in % correct
PCLT-1 = Language Adequacy score in % correct
PCLT-2 = Language Program score in % correct
DISTAR Language I Continuous Test results given in points correct
VMI results given in months
DDST results given in four catagories
Ad = adequate
In = inadequate
Q = questionable
U - untestable

P = pre test data
Po = post test data
D = difference between pre and post test data

Title of Project:	Autistic Educational Project
Location of Project:	Helen Gordon Day Care Center, Portland State University; Child Development and Rehabilitation Center, University of Oregon Health Sciences Center
Population Served:	Autistic Children, 4 to 21 years old
Funding Allocated:	$85,000
Project Beginning Date:	July 1, 1976
Project Ending Date:	June 30, 1977

Background and Rationale:

Experimental programs from around the country had been finding that early intervention was resulting in dramatic gains with autistic children. The Autistic Educational Project was established on the basis that what worked best in these centers would be incorporated in one location under the best staff-pupil conditions possible.

A funding base other than Title VI funds and integration of an expanded model of the Autistic Educational Project will probably occur within the next two or three years in the greater Portland metropolitan area. In the meantime, however, the Autistic Educational Project has filled several critical gaps.

First, the Autistic Educational Project met the needs of several autistic children who had never before been in formal programs. Second, services were provided to autistic children which school districts had identified as not being served.

Two additional components of the program were the training provided for pre-professionals about to enter their careers with the handicapped, and training for the parents of the autistic children.

Methodology:

The Autistic Educational Project curriculum focused on language, social, and self-help programs. Each child spent from 60 to 70% of a five hour day in language development programs.

The language program begins by reinforcing imitative sound production and moves through a sequence consisting of describing environment, labeling objects, labeling actions, expressing wants, identifying people, asking questions and sequencing events.

A second methodology utilized with the children was the Non-Speech Language Initiation Program (Non-SLIP) developed by Dr. Joseph Carrier and Timothy Peak. Through use of color and shape discrimination, a child learns to describe a picture with a seven word sentence by correct sequencing of plastic chips.

The third major language instructional procedure was the signed-speech method developed by Dr. Benson Schaeffer. The method incorporates imitative speech with the teaching of sign.

All programs, language and otherwise, were data based to the extent that every child's response was recorded. This data was summarized daily for purposes of making program decisions and indicating the rate of learning for a particular task.

Objective:

1. To demonstrate that autistic children can learn to communicate on a spontaneous level.

Evaluation: Language samples will be systematically obtained at the project, in integrated settings and in the home. Fifty percent of the samples will be self-initiated.

Results: Initially almost no appropriate communications could be elicited from the children. After one year's intervention, language could be elicited at any time from the children. The real barometer of language knowledge, "appropriate spontaneous communications", increased dramatically as well, from .26 an hour to 4.4 an hour, or one appropriate spontaneous communication every 12 minutes.

Baseline: 10/18/76

$\overline{M}$ = 1.3 appropriate spontaneous communications in a 5 hour period

Post Assessment: 6/1/77

$\overline{M}$ = 22 appropriate spontaneous communications in a 5 hour period

2. To teach autistic children the classroom survival skills of: attending to task; responding to cue; and appropriate social interaction.

Evaluation: Pupils will interact appropriately both at the project and at home 80% of the time during random time samples.

Results: The results of objective 2 are demonstrated with the analyses of; A) attending to task behavior, B) responding appropriately to cue (commands, questions, imitation and body parts) on the interaction format, and C) the long range learning to learn curve which supports classroom survival skills through appropriate communication.

(A) Attending to Task Behavior

Baseline: 9/76 $\overline{M}$ = 48%

Post Assessment: 6/77 $\overline{M}$ = 92.5%

(B) Interaction Format

A. Commands:
☐ Look at me; ☐ Touch the _______; ☐ Give me ____:
☐ Come here; ☐ Stand up; ☐ Sit down; ☐ Put the ____
(on, under, beside) the ____; ☐ ____________; ☐ _____.

B. Questions:
☐ What is your name? ☐ How old are you? ☐ What is this?
☐ Where is X ? ☐ Is this a ___? ☐ Do you want ___?

C. Imitations:
☐ Say _____; ☐ Do this _____.

D. Body Parts:
Touch your: ☐ nose; ☐ foot; ☐ ears; ☐ head;
☐ knees; ☐ mouth.

(C) Long Range Learning to Learn Curves

Figures 1-3 represent learning to learn curves which depict the children's progress in learning appropriate classroom survival skills through communication.

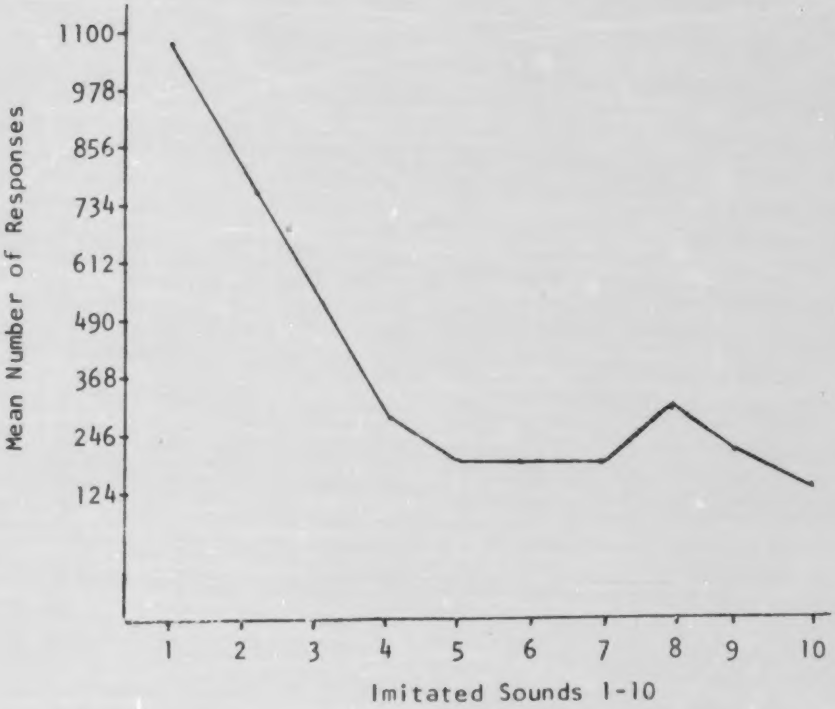
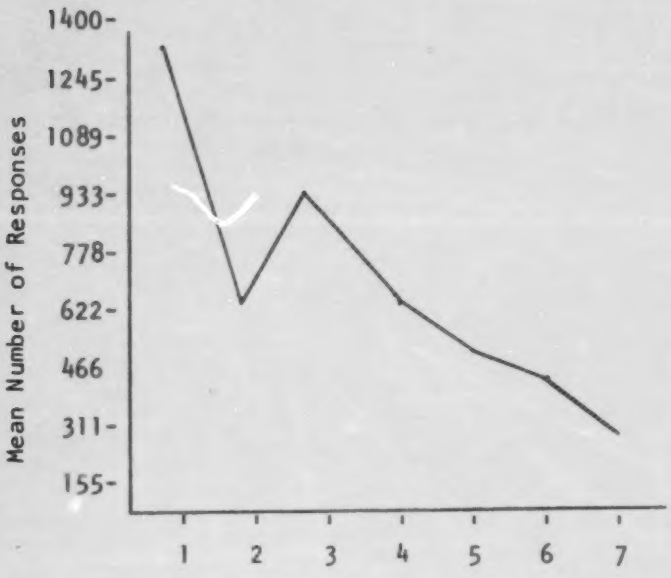
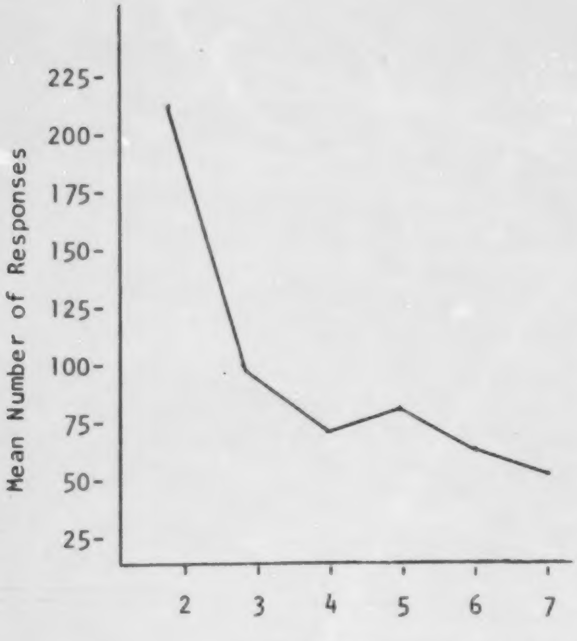


Figure 1



Signs Discriminated 1-7
Figure 2



RSP Sequencing Steps
Figure 3

3. To increase the autistic child's independent living skills, both at the project and at home.

Evaluation: Each pupil will perform independently 80% of age level items, as determined by the skills category of several Developmental Scales.

Results: The data indicates significant developmental gains in all areas with the overall mean growth for the 1976-77 year of 12.76 months.

	PHYSICAL AGE		SELF-HELP		SOCIAL		ACADEMIC		COMMUNICATION	
	Pre	Post	Pre	Post	Pre	Post	Pre	Post	Pre	Post
M= (7-14 yrs.)	31.5 mos.	40.75 mos.	29.5 mos.	45.25 mos.	18.25 mos.	21. mos.	16.5 mos.	25.25 mos.	4.5 mos.	16. mos.
M= (3-7 yrs.)	19.5 mos.	36. mos.	24. mos.	37. mos.	7.5 mos.	24.7 mos.	14. mos.	30. mos.	4.5 mos.	21.5 mos.
*M net gain for both groups =	12.87 mos.		14.37		9.97		12.37		14.2	

OVERALL MEAN GROWTH 1976-77 YEAR: 12.76 MONTHS

*Mean net gain indicates the mean number of developmental growth months in a year for both groups.

4. To demonstrate that autistic children can be maintained in a regular day care center, and School District Special Service Programs.

Evaluation: A record of the number of pupils placed in other settings will be maintained.

Results: During the 1976-77 academic school year nine children spent from twenty minutes to an entire school day in the adjoining day care center or in the public school setting. The integration process included such activities as a reading group, physical education, music, lunch, arts and crafts, playground, and structured small group play. A summary of the results follows.

YEAR	TOTAL # STUDENTS SERVED	TOTAL # INTEGRATED	INTEGRATED PLACEMENT
1975-76	12	2	4 day care 1 public school
1976-77	22	6 3	6 self-contained public school 3 day care
1977-78	?	7 4	7 (EMR, TMR, DD & regular) public school placement 4 self-contained public school

5. To develop a parent training component which will be available to other agency and service organizations.

Evaluation: Field testing, evaluation, and modification of the parent training packet until it is a functional product. The product-package will be on hand and available to other professionals. A record will be maintained of all packages distributed and information on the usefulness/effectiveness of the package will be solicited from consumers.

Results: At this time 13 parent training packets have been distributed in the piloting of the actual training and in the development of the packet. The training was presented in seven sessions with a small group of parents. The parents were responsible for giving constant feedback as the packet was in the developmental stage. Listed below are mean scores for the seven sessions.

Questions Related to Class Sessions	Mean Score (1 High - 5 Low)
1. Was material presented in class useful?	1.5
2. Were topics presented in an organized manner?	1.7
3. Were audio-visual aides effective as a means of presenting?	1.5
4. Was material too difficult for your comprehension?	2.9 (1 hard-5 easy)
5. Were the topics covered adequately in oral presentation?	1.9
6. Was the overall class organized?	1.6
7. Were activities useful in getting the subject matter across?	1.4
8. Did the guest speakers increase your comprehension of this material?	1.0

Questions Related to Reading Material	Mean Score (1 High - 5 Low)
1. Were the handouts supportive in your comprehension of the course?	1.6
2. Was the material too hard to understand?	2.5
3. Was the material in handouts adequately covered?	2.6*
4. Were the study questions too difficult?	2.6
5. Were the projects too difficult in the home?	2.6
6. Were the projects in the home useful in understanding the material?	2.3*
7. Was the role playing effective in teaching the required skills?	1.5
8. Did discussions with parent trainer and child's trainer increase your skills?	1.5
9. Were the goals and criteria for your involvement in class made clear to you?	1.4
10. Was the feedback and supervision beneficial?	1.4

Summary:
*3. More examples in writing and reading.
*6. Talk more in class and more contact in the home during training other than once a week.

Test Score Results:	Pretest	Posttest
	65.2%	89.4%

6. To provide extended consultative and training services to rural area agencies establishing programs for autistic children.

Evaluation: A quantitative count of agencies, personnel and pupils affected will be maintained.

Results: Training and consultative services were provided during the academic year in assisting parents and district/agency personnel in working with the autistic in behavior management, assessment and programming.

1976-77 count of agencies, personnel and pupils receiving consultative and training services.

CONSULTATIVE SERVICES:			
SCHOOL DISTRICT/AGENCY	# OF REQUESTS	PARENTS	# OF REQUESTS
1. Progress Center; Longview, WA	1	Pendleton, OR	1
2. Kerr Center; Lake Oswego, OR	1	Portland, OR	5
3. Salem Public Schools; Salem, OR	1	Orangeburg, SC	1
4. Parkrose School Dist.; Portland, OR	1	Boise, Idahc	1
5. North Clackamas School Dist.; Milwaukie, OR	1		
6. Child Development and Rehabilitation Center; Portland, OR	4		
7. Child Neurology Clinic; Portland, OR	2		
8. Beaverton School District; Beaverton, OR	2		
9. Portland Public Schools; Portland, OR	2		
10. David Douglas School District; Portland, OR	1		
11. Hood River School District; Hood River, OR	1		
12. Gutman Rehabilitation Program, Inc.; Portland, OR	1		
SUBTOTALS	18		8
TOTAL: 26			

TRAINING:	
INSTITUTION	# TRAINED
Reed College*	3
Portland State University*	45
Lewis and Clark College*	2
Portland Community College*	1
Child Development & Rehabilitation Center*	2
Oregon College of Education*	1
George Fox College*	1
Portland Tri-County Area**	22
Tacoma, Washington**	10
TOTAL	87

*Students
**Special Services Staff and Administrators

Third Party Evaluator's Comments:

For the third consecutive year this project continues to be exemplary in terms of progress with children and the dissemination of the results to other professionals. All objectives were met.

Of particular interest to the third party evaluators is the data presented for objective 1 related to gains in spontaneous language in Autistic children. Many projects can produce data which demonstrate gain by children in the training setting. Few care to examine the effects on children in other environments. These data demonstrate that the mean number of appropriate spontaneous responses from children increased from 1.3 to 22 in a five hour observation period. Considering that many of these children were non-verbal upon entry to the program, this is truly remarkable.

Again, for those professionals who are working with non-verbal children and have not seen this program, do it!

Title of Project: Child Neurology Clinic

Location of Project: Good Samaritan Hospital and Medical Center
Portland

Population Served: 340 Neurologically Handicapped Children

Funding Allocated: $43,000

Project Beginning Date: September 1, 1976

Project Ending Date: June 30, 1977

Background and Rationale:

The Child Neurology Clinic, located on the campus of Good Samaritan Hospital and Medical Center in Portland, has been in operation for over five years. This program has brought attention to the needs exhibited by neurologically and otherwise multi-handicapped children throughout the State of Oregon and other states in the northwest. The Clinic is divided into four basic components: (1) Comprehensive diagnostic and evaluation services; (2) Educational-medical direct services to children ages 0-6; (3) parent training; and (4) medical support system.

The basic philosophy of the Clinic is to serve children who are suspected of having a neurological impairment, epilepsy, seizure disorder, or related developmental disability. The Clinic program is designed to provide a comprehensive model of early childhood education, encompassing medical and educational intervention strategies. The classroom activities represent a replication of the early childhood education training model designed by Teaching Research Division, Monmouth, Oregon. Our primary focus was to provide the State of Oregon with a demonstration center for neurologically and multi-handicapped children age 0-6. The model has allowed us to serve and offer direct services to approximately 40 infants and children at Good Samaritan Hospital and on the campus of the University of Oregon

Clinical Services Building in Eugene. The medical support systems assist the classrooms in the form of physical therapy, psychology, social work, parent training, pediatric neurology and other related medical staff as deemed necessary. For children with seizure disorders, medications are monitored to minimize the seizure activity plus maximizing their alertness and ability to comprehend and respond to the environment. The Clinic preschool is one of the only such programs in the country which specifically services neurologically impaired or seizure disorder children ages 0-6. This program assists children with a variety of seizure disorders with the aid of a comprehensive treatment team and the latest techniques in medical management.

The comprehensive diagnosis and evaluation aspect of our program employs a licensed clinical psychologist, medical social worker, pediatric neurologist, educational specialist, physical therapist and speech and language specialist. The diagnostic clinic evaluates approximately 300 children per year. Upon completion of a thorough diagnosis and evaluation the treatment strategy is developed and articulated to parents. Educational consultation in the form of information sharing and curriculum planning is offered to schools at the parent's request.

The parent training component provides needed services to approximately 30 families on an ongoing basis. The parent training specialist meets with parents once a week in a clinical setting and teaches the parent specific techniques of behavior management and skill building. Upon completion of the necessary baseline data, the program is implemented by the parents. Program is reviewed by the parent training specialist who monitors the progress of the child. Parent training is also provided in a structured group setting for parents of children ages 3-9 whose concerns are specifically behavioral in nature (and when no neurological impairment or developmental disability is present).

The medical support system is available to provide the necessary consultation to all of the programs within the Child Neurology Clinic. The support system consists of physicians, physical therapist, occupational therapist, nurses and other health related professionals who are available to consult with our staff.

The Title VI funds made available to the Child Neurology Clinic supported three basic components. Objectives and evaluation strategies were developed. The three components were: (1) classroom activities, (2) diagnosis and evaluation, and (3) the educational specialist's relationship with public schools.

Objectives:

1. Diagnostic evaluation for 140 children who have been referred as neurologically impaired.

Evaluation: A log will be maintained to indicate a list of children evaluated, a description of the impairment and the disposition of the child.

Results: A total of 275 children ranging in age from two months through 19 years were evaluated in a ten month period of time. Forty-three percent of the children seen by our diagnostic clinic had a seizure disorder. Approximately 57% of the children seen were diagnosed as mentally retarded. Many of these children had behavior problems and learning disabilities associated with their seizure disorders.

The majority of the referrals to the clinic were made by physicians (81%) with Dr. Schimschock, our pediatric neurologist, contributing 65%

of the total. Additional referrals were received from public and private agencies (8%), schools (5%), parents (3%), and others such as public service announcements (3%).

The children were then referred for treatment to either preschool classrooms at the Child Neurology Clinic, the public schools, parent training/home intervention or specialized resources such as counselors or therapists.

2. Twenty-four children in the preschool classroom will demonstrate behavioral changes in the area of language, self-help, motor and academic skills.

Evaluation: Each child was baselined and individualized programs were written.

Results: Evaluation of the preschool program is done in terms of the number of programs implemented and the average increase in proficiency in each of the program areas. An examination of the data from the Infant-Toddler Program indicates that the most successful program area was in self-help where 11 programs were implemented with an average gain of 60%. Nineteen gross motor programs were implemented with an average gain of 20%. The area of receptive language and fine motor skills were of prime concerns for the infant-toddler with 26 and 24 programs implemented respectively. With the older preschool children, many program areas showed marked increases. These areas of success included self-help with an average gain in proficiency of 43%; expressive language 42%; gross motor 40%, and cognitive programs showed an average gain of 40%. The most thoroughly programmed area was the cognitive area having 37 programs written for the children.

A sample of eight behavior management programs with specific data is included which indicates the types of behavior programs that were administered during the project year. A sample of these data can be seen in Figure 1.

3. For school aged children the educational specialist will communicate to the public school classroom teachers the result of diagnostic evaluations.

Evaluation: A log will be maintained which will specify the number of contacts made with classroom teachers and the types of contacts made.

Results: A total of 44 students were evaluated which resulted in 77 visits to public schools with the specific purpose of sharing a diagnosis, assisting in program design or monitoring a specific program.

4. To assist the classroom teacher in designing and implementing the prescriptive educational programs.

Evaluation: The total number of programs designed will be specified. The number on which the student met a pre-specified criterion level of acceptable performance will be recorded. Five sample programs will be submitted that have been designed and implemented by the classroom teacher. Programs should include child data.

Results: In compliance with Objective 4, a log was maintained of the consultations completed with public school personnel. In addition five individualized sample programs are included which were designed and implemented by the classroom teacher with guidance from the Child Neurology Clinic educational specialist.

A review of the data suggests 68% of the total number of evaluations received consultation services. At the time of consultation the educational specialist provided pertinent information on medical problems, epilepsy inservice, seizure identification, management and information relative to anticonvulsants. Specifically, 23 inservice programs were provided to a total of 701 individuals. It also appears that the [illegible]livery of general educational goals were more successful than clearly prescribed programs designed with teachers. Specific problems encountered were lack of resources, hesitation and at times ambivalence on the part of the classroom teachers. Oftentimes the main teacher's complaints were large classes, scheduling time commitments and a philosophical resistence between other related professionals, principals, counselors, behavioral and learning disabilities specialists. These problems were especially noticeable when specific individual programs were recommended as reflected in the low return of data on such programs less than 40%. This was true even though the specialist scheduled return appointments to the school for follow-along. The data further suggest that implementation of specific programs developed by the specialist and the public classroom teacher were highly successful when data was maintained and the programs were followed according to plan. The data also suggest that the public school teacher was more likely to implement generalized recommendations as opposed to specific individualized treatment programs. These conclusions have important implications for services of an effective consultation model for the Child Neurology Clinic.

Third Party Evaluator's Comments:

This project has met all objectives specified in an exemplary manner. The services provided assessment, diagnosis, direct intervention, referral and counseling, which are needs which would not have been met otherwise in the Portland Metropolitan Area. It should be noted that the summary of data presented for each objective were supported by individual data submitted to the third party evaluators. The individual data were then analyzed and the summaries appropriately reflect it. Space prohibited these evaluators from displaying the individual data. The project staff and director are to be congratulated for a comprehensive and well documented successful project.

CHILD NEUROLOGY CLINIC
Preschool Program

SUMMARY OF BEHAVIOR INTERVENTION PROGRAM
Child: D.N.

Program Goal: Decrease throwing of inappropriate objects to two a week for two weeks

Status: Program terminated successfully

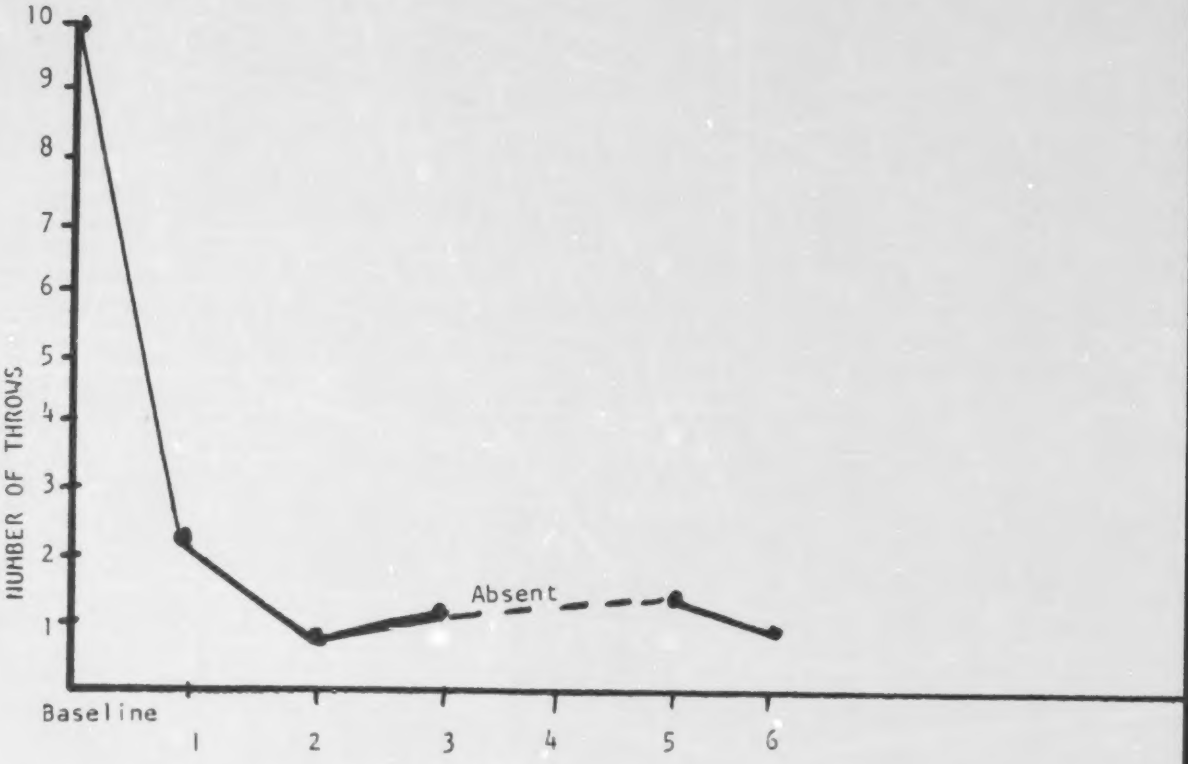


Figure 1
(Sample)

Title of Project: Providence Raises Awareness in Stimulating Environment

Location of Project: Portland Public Schools

Providence Infant Care Center
700 N. E. 47th Avenue
Portland, Oregon 97213

and

Lake Oswego Public Schools

Kerr Center
Marylhurst, Oregon 97036

Population Served: Severely and Profoundly Handicapped, Ages 4-21

Funding Allocated: $80,000

Project Beginning Date: July 1, 1976

Project Ending Date: June 30, 1977

Background and Rationale:

Providence and Kerr Children's Nursing Centers are skilled nursing facilities for non-ambulatory infants, young children and adolescents who, because of their severely handicapping conditions, require full-time nursing care.

Patients (birth to 21) are admitted to the Nursing Centers for a variety of conditions, both congenital and acquired. Infants with congenital heart defects are nurtured until they attain a size and weight necessary for corrective surgery. Children with cystic fibrosis or other chronic respiratory diseases may be cared for when their nursing needs overwhelm their families. Other children may have seizure disorders, microcephaly, chromosomal abnormalities, metabolic disorders, or degenerative central nervous system diseases. Some children, once normal, are at the Centers as a result of brain damage due to an infectious process or to trauma.

Regardless of the etiology of the child's disorder, the most common handicaps include seizure disorder, cerebral palsy, feeding problems, and sensory deficits including blindness, deafness, and paralysis.

The educational components of the program are planned so that appropriate special education services and habilitation will be designed to maximize the developmental potential of these multi-handicapped children, enabling the child's right to the most vigorous a body human skill can give him, and the most complete life of which he is capable.

Due to the nature of the medical setting and primary need for medical care of the children, close interaction between medical persons and educators is essential. A transdisciplinary team was established in the fall of 1976, for the purpose of rendering the most beneficial medical and educational services to enhance the total growth of the children.

Both of these Centers were funded under one contract, but because of the nature of each Center, separate objectives were provided for each.

Providence Children's Nursing Center and Portland Public Schools represent one united effort to provide educational services to these severely handicapped children, ages two weeks to nine years. A Montessori teacher had been with the Center seven years. In 1975, a speech and language clinician from the school district began part-time services to the Center, followed by part-time consultant services to the blind in the fall of 1975. A full-time teacher-coordinator was hired by the district in January, 1976, and by the fall of that year the program had received funding from this Title VI grant: PRAISE. An adaptive physical education specialist was added to the staff by the district at that time. The children served under the grant were ages 3 1/2 to 9 years, with a general functioning level ranging from birth to somewhat above 24 months, as measured against Gesell's normal developmental levels of Motor, Adaptive, Language, and Personal-Social Behavior.

Methodology:

A part of each morning and afternoon is spent with the children in the Activity Room or the Classroom. Through interaction with the roommothers (who tend to the daily needs of the eight children in each room), the grandmothers (of the Foster Grandmother Federal Program), student teachers and nurses, volunteers, and the professional staff of nurses, therapists and educators, the children daily receive stimulating sensory and motor activity.

Since the primary need of the children at the Center is medical care, it is essential that there be close interaction between the medical and the education personnel. For that reason, a transdisciplinary team was set up in the fall of 1976, to render the best possible services to the children. Members of the team include pre-language teacher/coordinator, speech and language clinician, Montessori teacher, registered nurse, physical therapist, and an adaptive physical education specialist.

Through the combined skills and knowledge of the PRAISE team and the total Providence staff, evaluation of the children and an individual program to meet the medical and educational needs of each child has been established and implemented. The educational goal is for each child to reach his top potential as a human being, gaining pleasurable experiences and interacting meaningfully with his environment. To this end the team works together to contribute significantly to the total development of the children of PRAISE, believing always toward the best.

Objectives:

1. Students will make measurable gains in the following areas: visual, auditory, gross and fine motor skills, expressive language, cognitive skills, and social development.

Evaluation: The following test was administered on a pre- posttest basis and results recorded and reported: P-PAC: Primary Progress Assessment Chart. (Since the Pre-language Checklist was used by only one teacher on a small sample of population, its data have not been included).

Results: The P-PAC was the instrument used for pre and posttest assessment of the total population, 25 children ages 3 1/2 to 8 years. Initial assessment was done by the learning manager at the time of staffing of each child, between September, 1976, and January, 1977. The posttest was done during the last week of May, 1977.

The P-PAC form gives a visual impression of general functioning on the lowest stage of social development. It includes areas of: Self-Help Skills, Communication, Socialization, Occupation. The number of items in each area includes: Self-Help: Eating-13; Mobility-12; Toilet and Washing-10; Dressing-6. Communication: Expressive-20; Receptive-18. Socialization: 21. Occupation: Dexterity (Fine Finger Movements)-14; Agility (Gross Motor Control)-16. Total: 130 items. Fifty-six percent of the population scored on fewer than a total of 10 items (posttest) with the remaining 44% ranging from a total of 11 items up to 60 (posttest).

Table 1 shows the number of items increased in posttest scores for each area, each child. Forty percent of the population indicated gains in areas of eating, mobility, expressive-receptive communication, socialization, dexterity and agility. The areas in which the largest number of these children indicated gain were socialization, dexterity, and agility. The remaining 60% (not listed on the table) held constant pre-posttest scores. One child included in the table shows a decrease in posttest items scored, in receptive communication, dexterity and agility. The nature of this child's degenerative central nervous system disease is a major factor involved in this incident. This child also indicated growth in socialization and one item in receptive communication. Upon viewing the total population and the nature of the handicapping conditions, many times simple maintenance of present behavior is a goal.

2. Alternative placement in an environment that is least restrictive and best suited to student needs will be planned.

Evaluation: The number of children placed in the least restrictive environment and a description of this environment.

Results: Six children were transfered from Providence Child Center to Kerr Center between August and November, 1976. The purpose for this transfer for five of the children was to enable them to live in a less-restrictive environment, to the end there would be more freedom for mobility, interaction with peers, and alternative classroom placement. The discussion of this item in the Kerr Center report will include two of these children who are attending a special school in the Lake Oswego area during the school year.

Table 1

Summary of Children Showing Measurable Gains on P-PAC*

CHILD	SELF HELP				COMMUNICATION		SOCIAL OCCUPATION		
	Eating	Mobility	Toilet	Dressing	Expressive	Receptive	Social	Dexterity	Agility
1	-	-	-	-	-	-	-	+1	+1
2	-	-	-	-	-	-	+2	+2	+1
3	-	-	-	-	-	+1/2	+1/2	+1/2	+1/2
4	-	-	-	-	-	-	+1	-	-
5	-	-	-	-	-	-1 +1	+2	-5	-3
6	+1	+1	-	+2	-	+4	+5	+2	+3
7	+1	+2	-	-	-	+3	+1	+3	+1
8	+4	-	-	+1	-	+9	+9	+1	+2
9	-	+2	-	-	-	-	-	-	-
10	-	-	-	+1	+1	+1	+1-1/2	+1-1/2	-

* (+#) = # of items increased
(-#) = # of items decreased

Objectives: (Kerr Center for Handicapped Children)

1. Students will make measurable gains in the following areas: visual, gross and fine motor skills, expressive language, cognitive skills and social development.

Evaluation: The Los Angeles Crippled Children's Services Growth and Development Assessment Instrument was administered on a pretest basis with continuing updating occurring through the year and at the close of the school year.

Thirty-two children were screened within the first month of admittance to Kerr. Of that number, 29 completed testing, 2 were discharged to their families, and one was admitted within thirty days of the year's termination. Each test was completed by an interdisciplinary team member, which included a physical therapist (gross motor section), speech pathologist (speech-language section), and teacher (adaptive section).

Of the population tested, 8 children were in the normal to above average intelligence, 8 were profoundly retarded, 9 were in the TMR range and one was diagnosed as autistic (Portland State University criteria for diagnosis). Two of the 32 had degenerative diseases, 1 had an extreme seizure disorder and 5 were severely physically handicapped with cerebral palsy and mylomenigecele.

Results: Of the 32 children, 7 made improvement in gross motor skills, 11 in fine motor skills, and 9 in expressive language. The 32 children averaged a 2.5 month growth in these areas.

Children were also tested on the Adaptive Scale which examined pre-cognitive skills. Growth was recorded in 13 students. On the Peabody Picture Vocabulary Test, one child showed a 1.4 month growth in receptive vocabulary. The Personal-Social scale showed a decrease in tantrum behavior in 2 children.

Of the total population, only 3 children showed no growth in any area which was attributed to the severity of their handicaps.

2. Alternative placement in any environment that is least restrictive and best suited to students' needs will be planned.

Evaluation: The number of children placed in a least restrictive environment and a description of this environment will be reported.

Eleven students were placed in public schools: 3 in Lake Oswego High School, 2 in Lake Oswego Junior High School, 2 in TMR classroom at Lake Grove Elementary School, 1 in TMR class at McKinley School in Beaverton, 1 at Bridger School for the Deaf, and 2 at Holladay School for the Physically Handicapped.

Results: The three students who attended Lake Oswego High School were mainstreamed into regular classes. The Kerr Center furnishes an aide to tutor, to help in mobility problems and to work closely with the counselors regarding academic and social expectations from the students. One student maintained a full day schedule and the other two participated on a half-day basis. The major emphasis of this placement was to promote normalization so students were encouraged to attend dances, football games and plays at the school which they did frequently. In exchange, a group of teenagers visited Kerr Center for several hours on Sundays to watch TV, listen to records and play cards. PIAT testing indicated academic growth of 1.9 and 1.2 for two students with no measurable growth noted for the third student. In addition to school placement, vocational rehabilitation counseling was supplied and all three are participating in the Cerebral Palsy Workshop this summer.

One of the two students who entered Lake Oswego Junior High School was placed in a regular seventh grade class and demonstrated a .8 month growth academically on the PIAT. The other student was placed in the EMR program and was mainstreamed for non-academic subjects. Due to his inability to assume responsibility for his own behavior, he was withdrawn after three months and put in an intensive work-study program at Kerr.

The two students who attended the TMR program on a half-time basis demonstrated a .8 and .3 month growth on the PIAT. The other child who attended McKinley School was returned to Kerr due to increasing health problems.

Individual progress reports were received for the three students in the Regional Programs. One student achieved academically where it was expected, one student was able to control her temper tantrums, and the other student was found to have a vision problem and a program was begun to help the student use a different modality to learn. Weekly conferences were held with both Regional and Kerr staff so that their programs could be reinforced at both places.

Evaluation of Project: The school placement programming, in general, was deemed successful for 8 of the 11 students. Projections for next year are as follows:

1. Continue one student in Lake Oswego High School on a half-time basis for socialization.
2. Continue one student in Lake Oswego Junior High School.
3. Place four students in the TMR class at Lake Grove on a half-time basis.
4. Continue three students in the Regional Programs.
5. Place three students in alternative programs to prepare for their GED's and to work closely with the Vocational Rehabilitation counselor.

6. Place two students in community organizations for socialization (i.e., 4-H Club, Cerebral Palsy Workshop, etc.).

Third Party Evaluator's Comments:

All objectives as were prescribed to each of the Centers were completed and data were reported as specified. A perusal of the results by Portland Public Schools and Kerr Center shows that appropriate changes were achieved with the children involved. It should be noted that movement of some children from the Providence Child Care Center to Kerr Center shows a planned movement of children to less restrictive environments and demonstrates foresightedness and consistency with current special education protocol.

The efforts of these two facilities to provide a cooperative educational program for handicapped children deserves to be applauded. The evaluator felt that these two projects could provide exemplary models for others.

Title of Project: Vocational Education for the Severely Handicapped

Location of Project: Washington County I.E.D.
Portland State University

Population Served: 14 MR/DD Adolescents

Funding Allocated: $38,287

Project Beginning Date: July 1, 1976

Project Ending Date: June 30, 1977

Background and Rationale:

The Portland Metropolitan Area had no program to provide job placement services for severely handicapped adolescents. The need for this service was identified by the large number of 16-19 year old individuals who dropped out of school programs. These students had no day program and little potential for employment. Therefore, the purpose of this program was to place these individuals in jobs in the community, sheltered workshops or activity centers.

Methodology:

Fourteen adolescents were provided with services in this project. Two trainers were employed to assess the population, design prescriptive programs, train the clients and place them in the community. The project was housed at Portland State University and was available to the handicapped clients between 9 am and 3 pm. Each client was given the following services during the duration of the project:

Phase I - Travel Training. The purpose of this phase is to provide each student with the ability to move from his home to Portland State University program site to a job site independently, utilizing public transportation or walking, which ever is applicable.

Each severely handicapped participant will be trained (within his physical limitations, i.e., wheelchair) to ride public transportation to Portland State University program and future employment settings.

Phase II - Vocational and Academic Assessment. The purpose of this phase of the program is to gain sufficient information to determine the need for prescriptive educational programs and the vocational areas in which the student might have potential success when vocational training is initiated. This phase will include an assessment of each trainee using a Toward Competency Checklist. Evaluation will also include observations of deviant social behaviors. This evaluation of the trainee will facilitate specific decisions regarding potential placement in the community and need for prescriptive educational programs.

Phase III - Job Exploration. The purpose of this phase of the program is twofold. One, to allow the student to observe a variety of jobs in the community with the ultimate goal of him selecting one which appears to be appealing and within his capabilities. Two, to further evaluate the student in a job setting relative to social behaviors, speech and language, and his ability to feel comfortable in each work environment.

Phase III of our program will be Job Exploration and Job Awareness. During this phase of the program, each participant's day will be broken up into three segments. The first segment of each morning will include an academic classroom experience where a program prescription written by the teacher will be implemented by individual tutors. These programs will help the handicapped individual work on his problem areas. In some cases students may need special assistance in grooming, being on time, or learning how to talk to an employer. During this academic time each morning, each young adult will have the opportunity to have one to one and small group assistance in his personal areas of need through role playing the job interview with a video tape; filling out job applications; making phone calls; getting new clothing or polishing shoes. For some students support will be provided through one to one counseling on work attitudes and what would be expected of them.

The second part of each day will include work in a sheltered workshop and assessment center set up at Portland State University. Through this vocational workshop we will gain contracts from various companies in the community and keep data to see exactly what these young handicapped adults can do. What were their manipulative skills? Do they need to speed up? Would they have any potential for doing packaging and wrapping? Do they need any clerical skills?, etc. Each young adult will spend part of his time in this part of our workshop each morning giving us the data to sell him to an employer. It will be our goal to locate contracts in the community, bring them to our Center, train one of our trainees to do the job, then return them to a job in the industry that provided the contract.

Then during this job exploration phase, they will also spend part of their day in the community. In this phase they will go on field trips to various industries and businesses and talk to employers about what jobs are all about. Local businesses, banks, foods services, large industries such as Tektronix, Omark Industries and Safeway will cooperate in providing excellent field trips and opportunities for these young adults to see what the world of work is really all about.

Phase IV - Community Job Tryouts. The purpose of this phase of the training is to provide the student with an opportunity to try a variety of jobs so that he can be evaluated on his ability to perform the job successfully. If the class job performance is appropriate, there is a high potential for carrying the job tryout to a part-time or full-time placement.

These will be pursued on the basis of the interest expressed and evaluation of teacher, trainer and data collected in Phases II and III. Together the trainer and the handicapped participant will formulate a job tryout plan. Most participants will be encouraged to select two or three areas for job tryouts. Placements will be made in various clusters with the average job tryout lasting three to five days. One participant may begin Phase IV with a job tryout at a large bank in the food service area. She may then move to a job tryout in a take out restaurant. During these job tryouts, the participant will be paid minimum wage per hour for working time and thus will be covered by all state insurance and social security benefits. Pay will be used to reinforce appropriate work habits.

Phase V - Job Placement. The purpose of this phase of the program is the terminal goal for each client in our program. This is part-time or full-time placement in a job that is remunerative to the student.

Following Phase IV and the opportunity to try out several jobs, the trainer and the handicapped participant will evaluate performance, skills demonstrated and employers' reactions before determining final placement goals. Like any population of their normal peers, a wide variety of interests and capabilities will emerge. In most cases one solid appropriate interest area will emerge by this time and the trainer and the handicapped participant will be able to go job searching with some specifics in mind. Often one of the Phase IV exploration sites will be used as a final placement. In other instances trainers will be able to trade 'slots' in order to blend talents. In some instances a handicapped student may not be ready to move through each of these phases. Therefore, our program is an individual one for each handicapped person who enters each phase as he is ready and is provided with the appropriate lead-up skills. This is only the flow process. It will be adapted to each handicapped participant as his program needs vary.

Phase VI - The Resource Room. The resource room serves an ancillary function. It is the coordination center for daily activities, the place where programming materials are stored, the place for monitoring and reducing deviant social behaviors, and the place where many prescriptive programs are delivered. All activities occurring in the resource room, however, are a response to community/vocational expectations which are usually dictated by potential employers.

Objectives:

1. To train selected severely handicapped adult clients to acquire skills required for placement in the community.

Evaluation: Design a task analysis for each work task. Test each client on each behavior of the task. Report those data.

Results: Data for this objective are summarized in Table 1.

2. To train severely handicapped adult clients to acquire those independent living skills necessary for placement in work activity center or jobs in the community.

Evaluation: Checklists of appropriate social and independent living skills will be designed. Criterion levels of acceptable performance will be established for each behavior on the checklist. Clients will be evaluated on each behavior on the list. As the client acquires new behaviors on the checklist, these will be dated. A task analysis will be designed for each skill that clients demonstrate they do not have. The client will subsequently be evaluated on all behaviors contained in the task analysis. After training is initiated, the client will continue to be evaluated on all behaviors until he demonstrates that he can perform each of them.

Results: Data for this objective are summarized in Table 1.

3. To reduce and/or eliminate the incidence of behavior problems which prohibit clients from acquiring skills and/or job placement.

Evaluation: Baseline data will be taken on each specific behavior as to the number of times it is occurring during a specified observation period. During and after intervention training, additional observations will be made until the incidence of occurrence is reduced to a level that has been established as acceptable by the trainer.

Results: Data for this objective are summarized in Table 1.

Third Party Evaluator's Comments:

A summary of the data for this project would indicate that fourteen severely handicapped adolescents were trained to be placed in community jobs or sheltered employment. They were provided with 69 job explorations, 13 job tryouts and 14 job placements. Of these placements 64% of them were in the community, 22% in a sheltered workshop and 14% in a work activity center. Related to program design and implemented, 32 were designed for work skills, 149 for academic or independent living skills and 10 for behavior problems. Data indicated that 50% of the work skill programs met criterion and 75% were maintained three months later. Sixty percent of the independent living skill programs met criterion level and 52% were maintained after 3 months.

These data would indicate that the objectives for this project were met. However, several questions should be asked. These are, why were 149 programs designed for academic/independent living skills and only 32 for work skills if the goal was job placement for each client. Also, one would think that there were more than 10 behavior problems that were demonstrated by these students over the duration of a year. More emphasis should have been given to this area, since it is known that behavior problems are the major reason why we are not successful in placing the MR/DD population on jobs in the community.

Table 1

The Number of Programs (Work, Academic and Behavior) Initiated and Maintained

CLIENT	# of Explorations	# of Job Tryouts	# of Placements	Where Placed*	Length of Time	Work Oriented Programs			Academic Type Programs			Behavior Programs		
						# Initiated	# C.L.A.P.**	# Maintained	# Initiated	# C.L.A.P.**	# Maintained	# Initiated	# C.L.A.P.	# Maintained
1	4	-	-	-	-	-	-	-	6	4	4	1	1	1
2	7	2	3	C C SWS	2 days 5 months J. Start	4	4	4	11	8	7	-	-	-
3	-	1	1	C	11 months	1	1	1	5	1	1	-	-	-
4	8	1	1	C	1 week	1	-	-	5	1	1	-	-	-
5	10	-	1	C	Just Started	-	-	-	6	6	6	-	-	-
6	3	1	1	C	2 weeks	6	4	6	6	2	1	-	-	-
7	9	4	1	SWS	1 week	6	-	-	19	16	4	2	2	2
8	6	-	1	-	-	-	-	-	27	18	9	1	1	1
9	1	-	1	C	7 months	-	-	-	-	-	-	-	-	-
10	-	-	1	C	Just Started	-	-	-	5	4	-	-	-	-
11	10	1	1	SWS	2 weeks	6	2	-	14	9	2	-	-	-
12	-	-	1	WAC	Just Started	-	-	-	16	10	6	1	-	-
13	3	-	1	WAC	Just Started	-	-	-	19	9	5	4	3	2
14	8	3	1	C	7 months	8	5	1	10	2	1	1	1	1
TOTALS	69	13	15	C=9 SWS=3 WAC=2		32	16	12	149	90	47	10	8	7
MEAN							50%	75%		60%	52%		80%	70%

* PLACEMENT CODE

C = Community
SWS = Sheltered Workshop
WAC = Work Activities Center

** C.L.A.P. = # of Young Adults Reaching Criterion Level of Acceptable Performance

Title of Project: Early In - "Validation"

Location of Project: Washington County

Population Served: 532 children screened, 50 served in the Home Instruction Phase

Funding Allocated: $21,100

Project Beginning Date: July 1, 1976

Project Ending Date: June 30, 1977

Background and Rationale:

The need for a program that could systematically assess a preschool child's skills and provide the needed training was expressed by local educators who felt many beginning first graders needed special attention prior to entering school if they were to experience success. The Early-In screening and home instruction program was designed and has been successfully implemented in Union County since 1971. The program's success has led to its expansion in several other counties, including Washington County, for validation.

Methodology:

The major purpose of the project was to provide county-wide diagnostic and prescriptive intervention services to selected five year old children through parental home instruction. In accomplishing this goal, the project engages in a nine step procedure. These steps are detailed briefly below.

1. *Identification*. The five year old population within the county is identified through a census conducted by local school districts, public awareness through the utilization of news media and referral processes.

2. Screening. Group screenings of these children are conducted through diagnostic clinics located throughout the county. These screenings focus upon an assessment of gross motor, speech, language, vision, cognitive, sensory-motor, visual discrimination and auditory discrimination developmental areas. On the basis of screening, profiles are provided to school staff.
3. Selection. Based upon the foregoing assessments, children are selected for participation in the project. Selection criteria include age, severity of problem, and parental willingness to participate in home instruction activities.
4. Goal Setting. Individual instructional goals are established for the children based upon their assessed developmental needs.
5. Prescription. Project staff select and/or develop instructional materials and approaches which can be used to successfully accomplish the individual goals.
6. Home Training. Project staff instructs parents in the use of the prescriptive materials. Modeling, demonstration and other skill building techniques are used in this home training process.
7. Home Instruction. Parents employ the prescriptive materials on a regular basis.
8. Monitoring. Project staff regularly assess the progress of the children and the parent.
9. Evaluation. At the conclusion of the home instruction period, the child's performance is assessed to determine goal attainment and/or the need for continued intervention. In addition, all other five-year-olds are reassessed to provide school staff with entry-level information for their first grade children.

The project was supervised by Washington County IED's Director of Special Education and coordinated by an Early Childhood Education Specialist. There were two home instruction aides and one part-time speech specialist. The coordinator also served as a home trainer-instructor.

As a result of the screenings administered, a prescriptive plan was designed for each child enrolled in the home instruction phase of the program. Each child was then visited in the home by a home trainer for one hour each week for 15 weeks. During this time the trainer brought specific curriculum packets to be done by the child with the parent. The home instructor served as a model and consultant for each phase of the home instruction program.

At the end of the 15 weeks of home instruction each child was evaluated, posttested, and individual scores noted for gain in each of the areas of weakness for each child. The results were graphed and recorded. A copy was given to each parent of a child in the home instruction program. Copies are given to the prospective first grade teachers of these children, also. Referrals were made to appropriate agencies if further evaluation of any child was deemed necessary. Other kindergartens were given the screenings as a service to the first grade teachers and public schools.

Objective:

1. Eighty percent of all home instruction children who are enrolled in the home instruction program will improve pre- posttest raw scores on the Screening Test for Early Progress (STEP).

Evaluation: The Screening Test for Early Progress will be administered to each child on a pre- posttest basis.

Results: The mean scores for pre- posttesting on the Screening Test for Early Progress (STEP) of each developmental and cognitive area are displayed in Table 1.

The results of this study indicate that the mean of each developmental area improved significantly. In the pretest results it is apparent that nine out of twelve areas screened are below the chronological age line and thus are below the norm for those specific developmental areas. As a result of the Home Instruction phase of the Early-In Program, the posttest results show only two of the twelve areas tested to be below the norm. It should also be noted that 80% of all the children in the home instruction program improved by a 20 point gain on raw scores of the pre- and posttest of the Screening Test for Early Progress (STEP).

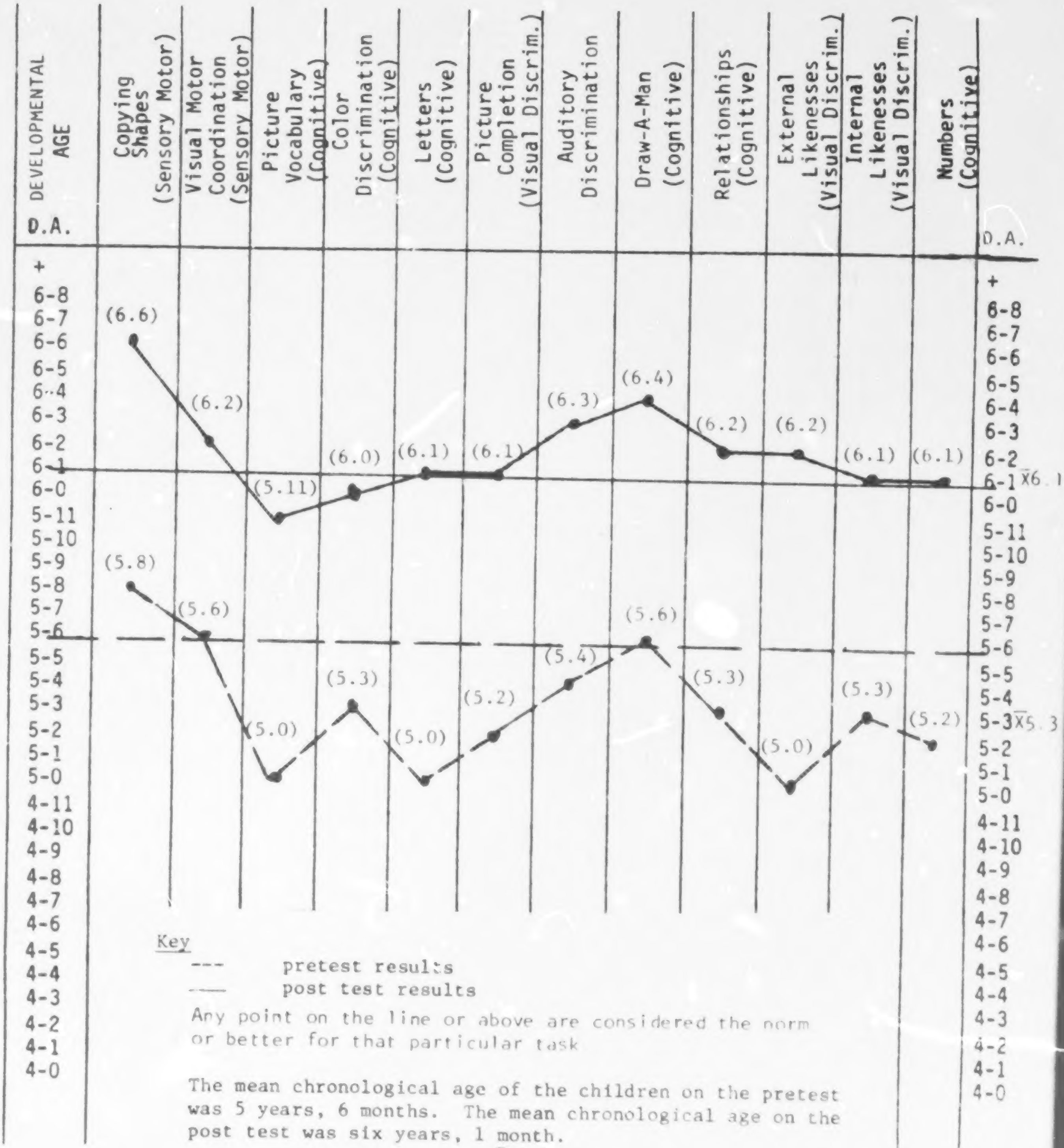
Letters of evaluation were also sent out periodically to both parents and educators. This was done to gain a feel for the response to the program. It was quite evident that the program was successful based on the returned questionnaires. Both parents and educators felt the program's strong points lay in the "double service" it provided - that of identification of specific learning problems through the STEP screening, and the remediation of these specific areas through the home instruction phase of the program. Many educators expressed their appreciation that much of the Early-In's curriculum enhanced or reinforced that which they were stressing in their school programs. Also, the parents and teachers felt the one-to-one attention that each child received was often the keypoint to his "catching on" and progressing more quickly than in the standardized classrooms. Parents also felt great moments of awareness when they found they, too, could "teach" their child. This last component was one of the most significant phases of the programs.

Third Party Evaluator's Comments:

Data displayed in Table 1 indicates that the objective for this project was met. During pretest the mean chronological age for the 50 children was 5.6 years and the mean developmental age was 5.3 years. On the posttest the mean chronological age was 6.1 years and the developmental age was 6.1 years. This indicates an 8 month gain after 15 weeks of training for the 50 children. Also noteworthy is that nine of twelve curriculum areas were below the norm during pretest and only two of twelve areas were below the norm at the posttest. These data indicate that maximum child gain was made during the fifteen weeks of training. The staff are to be congratulated for their performance.

TABLE 1

PROFILE OF DEVELOPMENTAL AND COGNITIVE MEAN SCORES



Key

--- pretest results

—— post test results

Any point on the line or above are considered the norm or better for that particular task

The mean chronological age of the children on the pretest was 5 years, 6 months. The mean chronological age on the post test was six years, 1 month.

Title of Project: Portland Developmental Kindergarten
Location of Project: Portland Public Schools
Population Served: Kindergarten Handicapped - Ages 5 & 6
Funding Allocated: $89,107
Project Beginning Date: July 1, 1976
Project Ending Date: June 30, 1977

Background and Rationale:

For some time, Portland Public Schools has been aware of the lack of special education programs to meet the needs of handicapped kindergarten aged children. In order to meet the needs of these children, Portland Public Schools initiated plans for the Developmental Kindergarten. The population served was to include kindergarten aged children exhibiting one or more of the following handicapping conditions: language disordered, educable mentally retarded, developmentally disabled, emotionally handicapped, physically handicapped, hard of hearing and speech impaired. This was the second year of a Title VI-B Project.

Methodology:

One Developmental Kindergarten classroom was set up in each of the three areas of Portland Public Schools. In Area I, the classroom was at Kenton Elementary School, in Area II at Wilcox Elementary School, and in Area III at Sunnyside Elementary School. All three teachers held a Master's Degree in Special Education. An itinerant speech/language clinician rotated among the three classrooms providing therapy to the students on a one-to-one and small group basis. Each teacher had a half-time aide during the morning part of the program. Some of the classroom teachers utilized parent and student volunteers.

Each of the classrooms maintained an enrollment of between eleven and fifteen students who were referred from regular kindergartens in the district, outside agencies, and county special education programs. During the school year a total number of forty-five children were served in the three classrooms. The morning program began at approximately 9:30 a.m. and ended at approximately 12:00 noon. Bus transportation was provided to transport students to and from school.

In each of the morning classrooms, instruction in social, motor, self-help, and pre-academic readiness skills was provided in small group settings. Also, individualized educational programs were written for each child and executed by the classroom teacher, aide, or trained volunteer. In addition, special speech and language programs initiated by the speech/language clinician were carried out by the classroom aides.

The afternoon program consisted of the classroom teachers giving itinerant service to handicapped kindergarten children in their own neighborhood schools. The teachers used similar programs stressing social, motor, self-help, and pre-academic readiness skills with the afternoon population. In Area I and Area II selected morning children exhibiting specific speech and language problems stayed through the lunch hour and into the afternoon. The speech/language clinician would then see these children for additional therapy. In Area III selected children would go home on the bus but would return again in the afternoon for speech and language services. In Area II the speech/language clinician also gave itinerant service to two additional children in their own neighborhood school. A total number of seventeen children were seen in the afternoon program.

The three classroom teachers and speech/language clinician held periodic conferences with parents to discuss goals and objectives, teaching strategies, and progress reports for each child.

Objectives:

1. To increase the development of skills for selected kindergarten children served in the morning in the curriculum areas: social, cognitive, motor, self-help and language.

Evaluation: The Systems Fore Developmental Sequence will be used as an assessment instrument. Baseline data will be taken on each child. As the criterion level of acceptable performance is met by each child on new behaviors, these will be dated. In addition, the Daberon Screening of Preschool Readiness Test will be used on a pre- posttest basis. Pretest data will be taken by October 1 and posttest data by May 31.

Results: Tables 1-6 show the pre and post data on the Systems Fore Developmental Sequence in reading, mathematics and language and gross and fine motor behaviors for each of the three areas. The Systems Fore curriculum is divided into strands or areas of instruction such as visual and comprehension in reading, geometry-measurement and number-numeral in mathematics and phonology, snytax and semantics in language. Within each strand there are several levels that range from birth to ten years. Within each level there are items listed. Each item is an instructional objective. The figures in Tables 1, 4 and 7 are the number of items passed by each child. An example of a reading item is, "discriminates printed geometric shapes in left to right sequence." An example of a mathematics item is, "associates clocks and calendars with telling time." An example of a language item is "uses five word verbal responses."

Tables 7-9 show the pre and post data of the Daberon - A Screening Device for School Readiness. This screening covers knowledge of body parts, color and number concepts, functional use of prepositions and plurals, the ability to follow directions, general knowledge, visual perception, gross motor development and the ability to categorize. The Daberon is for four, five and six year old children. The total possible tested was one hundred ten.

2. To reduce or eliminate inappropriate social behaviors.

Evaluation: The Rutland Social/Behavioral Test will be given on a pre- posttest basis to all children. A copy of the Rutland will be submitted to Teaching Research by February 7, 1977.

Results: Tables 10, 11 and 12 show pre and post data of the Rutland Social/Behavioral Test for each of the Area classrooms. The socialization aspect of the test includes the following stages with specific objectives given for each stage: Stage I - 90 trust an adult sufficiently to respond to him; Stage II - participate in activities with others; Stage III - find satisfaction in group activities; Stage IV - participate spontaneously and successfully in group; Stage V - initiate and maintain effective peer group relations independently. The behavioral aspect of the test includes the following stages with specific objectives given for each stage: Stage I - trusting own body and skills; Stage II - participate in routine activities; Stage III - apply individual skills in group processes; Stage IV - contribute individual effort to groups; Stage V - respond to critical life experiences with adaptable and constructive behavior. The figures given in Table 10 represent the number of specific objectives each child achieved within a particular stage. The total number of objectives possible for each stage is given in parenthesis.

3. To move project children to regular kindergartens, first grade or other appropriate special programs that have a lesser restrictive environment than the project classroom.

Evaluation: A log of the number of preschool children transferred to other environments will be maintained. The duration of time they spend in the handicapped child program and the placement made will also be documented

Results: Nine project children were placed in less restrictive enviroments during the school year. The average duration of time they spent in the handicapped child program was 5.1 months. All nine of the children were placed in regular kindergarten classrooms.

4. To meet with parents for the purpose of assisting them to enhance the skills acquired by their handicapped children.

Evaluation: A log of the number of contacts made with parents and the duration of these contacts and the purpose of the contact will be maintained by the project staff.

Results: A total of five hundred twenty parent contacts were made by the Developmental Kindergarten staff. The average duration of these conferences was twenty minutes. The purpose of twenty-five percent of the parent contacts was to give general information about the Developmental Kindergarten Program and discuss goals for the year. Approximately forty-three percent of the contacts were devoted to explaining to the parents their child's progress and to discuss any concerns or questions; seventeen percent of the contacts were spent counseling parents about home programs for their child; fifteen percent of the contacts were spent conferencing parents about their child exiting from the program and being placed in a less restrictive environment.

5. To provide in-service training for teachers. The content of this training will be determined by February 15, 1977.

Evaluation: Behavioral objectives will be developed by the person who is to provide the in-service training for the teachers. Criterion levels of acceptable performance will be specified for each objective and specific methods for evaluating the acquisition of each objective by teachers. These data will be collected during the in-service training.

Results: The presentations scheduled for the in-service training included one session with Dr. Edna Wooten of the University of Oregon; three sessions with Dr. Gary Larsen, Assistant Director of Special Education, Portland Public Schools; four sessions with Ms. Lavon Haley, Language Disorders Department Chairperson, Portland Public Schools.

The purpose of Dr. Wooten's presentation was to provide alternative theories in adaptive physical education appropriate to the developmental kindergarten population. The behavioral objective stated for the teachers was for them to participate in the session using a discussion format. Each teacher complied with this requirement. No data were collected during this presentation as it was not required by the instructor.

The purpose of Ms. Haley's presentation was to provide training on auditory, visual and kinesthetic perceptual problems of kindergarten aged children. As stated by the instructor, the four sessions were to address learning modalities, identification of perceptual problems, assessment tools, methods and materials for remediation and program development. The behavioral objective was that each teacher participating would informally assess one or more children in their class. Assessment by observation and/or specific tools was to be directed toward visual and/or auditory perceptual problems. Each teacher was to bring his/her data and observations to the final workshop session for program development. Each teacher complied with the above objective and submitted the appropriate data.

Only one of three scheduled sessions with Dr. Larsen was held. No objectives or criterion levels were provided.

6. To increase the development of skills for selected preschool children who are served in the afternoon in the areas of social, cognitive, motor, self-help and language.

Evaluation: These children will be pre- posttested on the Daberon Screening for School Readiness Test.

Results: Table 13 shows the pre and post data of the Daberon - A Screening Device for School Readiness for the afternoon population. This screening covers knowledge of body parts, color and number concepts, functional use of prepositions and plurals, the ability to follow directions, general knowledge, visual perception, gross motor development and the ability to categorize. The Daberon is for four, five and six year old children. The total possible items tested was one hundred ten.

Third Party Evaluator's Comments:

The data submitted by the project staff indicate that all objectives in this project were met with the exception of the objective related to in-service training. Childrens' gains in the areas of reading, math, language, gross and fine motor skills displayed in Tables 1-6 show gains that are acceptable for time spent in training.

Data from the Rutland Social/Behavioral Test also indicate gains made by children in these areas.

The movement of 9 of the 45 project children back to a regular setting is also significant. The number of contacts made with parents is also an indicator that the teachers attempted to get as much parent involvement as possible.

The data submitted for the objective related to in-service training for teachers are not acceptable. Admittedly, the project administrator and the third party evaluators discussed the absence of ample data for this objective several times during the year. No attempt was made to require those who provided in-service training to demonstrate that any impact was made on teacher behavior. Therefore, the objective was not met.

Table 1

SYSTEMS FORE DEVELOPMENTAL SEQUENCE — Kenton - Area I

Child	Reading						Mathematics						Language								
	Visual			Comp.			Geom.			Num.			Phon.			Syntax			Semantics		
	Pre	Post	Dif.	Pre	Post	Dif.	Pre	Post	Dif.	Pre	Post	Dif.	Pre	Post	Dif.	Pre	Post	Dif.	Pre	Post	Dif.
1	26	47	21	2	15	13	22	34	12	6	16	10	21	24	3	24	31	7	39	51	12
2	26	31	5	0	10	10	11	21	10	3	11	8	18	19	1	25	35	10	34	47	13
3	22	35	13	8	12	4	22	24	2	6	8	2	26	28	2	26	27	1	42	44	2
4	32	47	15	9	15	6	19	38	19	6	22	16	20	26	6	13	23	10	38	57	19
5	21	36	15	2	5	3	7	16	9	3	6	3	11	14	3	3	4	1	17	27	10
6	9	23	14	1	6	5	5	14	9	2	10	8	12	16	4	2	5	3	13	15	2
7	28	45	17	3	14	11	27	42	15	5	27	22	16	22	6	12	13	1	34	52	18
8	16	40	24	2	14	12	4	15	11	3	10	7	21	33	12	36	42	6	38	54	16
9	19	40	21	3	12	9	15	28	13	4	15	11	13	14	1	11	12	1	30	40	10
10	41	46	5	7	11	4	33	41	8	7	28	21	21	25	4	14	14	0	38	59	21
11	31	45	14	3	16	3	27	40	13	6	17	11	43	50	7	39	40	1	87	89	2
12	7	22	15	2	7	5	7	18	11	2	6	4	12	19	7	15	16	1	28	39	11
13	20	41	21	3	9	6	14	29	15	5	20	15		*			*			*	
14	35	39	4	3	14	11	13	29	16	8	22	14		*			*			*	
15		30			8			23			8										

*moved before posttest given

Table 2
GROSS AND FINE MOTOR SKILLS

Kenton - Area I

Child	Gross Motor															Fine Motor												
	12-17 mo. (6)		18-23 mo. (11)		24-29 mo. (9)		30-35 mo. (8)		36-48 mo. (11)		48-60 mo. (7)		60-72 mo. (5)		Diff	18-23 mo. (15)		24-29 mo. (14)		30-35 mo. (21)		36-48 mo. (10)		48-60 mo. (12)		60-72 mo. (15)		Diff
	Pr	Po	Pr	Po	Pr	Po	Pr	Po	Pr	Po	Pr	Po	Pr	Po		Pr	Po	Pr	Po	Pr	Po	Pr	Po	Pr	Po	Pr	Po	
1	6	6	10	11	7	8	6	8	2	5	0	3	0	0	11	13	15	12	14	19	21	7	8	1	4	1	4	13
2	5	6	11	11	8	9	8	8	6	8	1	5	0	1	9	14	15	10	14	5	20	1	7	0	4	0	2	32
3	6	6	11	11	9	9	7	8	9	9	5	5	3	3	1	15	15	13	14	19	21	7	9	10	12	11	12	8
4	6	6	11	11	9	9	7	8	6	8	2	6	1	3	9	15	15	10	14	15	20	6	10	5	10	4	14	28
5	6	6	11	11	8	9	7	8	4	9	1	3	0	2	11	15	15	14	14	20	21	2	6	10	12	9	11	9
6	6	6	11	11	9	9	7	8	8	9	2	5	0	2	7	10	15	7	13	16	18	6	8	1	5	1	3	21
7	6	6	11	11	7	9	5	7	5	9	0	4	0	1	13	14	15	10	14	15	20	6	9	5	11	4	11	26
8	6	6	11	11	9	9	7	8	7	9	5	6	2	4	5	15	15	13	14	15	20	5	10	6	10	5	7	17
9	6	6	11	11	8	9	8	8	5	7	3	6	0	2	8	15	15	14	14	10	15	6	8	8	10	8	10	11
10	6	6	11	11	9	9	8	8	11	11	7	7	2	2	0	15	15	14	14	19	21	9	10	10	12	10	14	9
11	6	6	11	11	9	9	8	8	10	11	6	7	3	5	4	15	15	14	14	21	21	9	10	9	12	10	13	7
12	5	5	10	11	7	8	6	7	1	4	1	1	0	0	6	15	15	10	14	5	10	1	5	1	5	0	1	18
13	6	6	11	11	9	9	8	8	9	10	5	7	1	3	5	15	15	14	14	18	20	8	10	8	10	9	14	11
14	6	6	11	11	9	9	6	7	5	10	3	7	1	4	13	15	15	14	14	19	21	6	8	5	7	2	5	9
15	6	6	11	11	9	9	7	7	5	7	3	4	3	3	3	15	15	14	14	14	21	8	8	4	10	2	10	21

Table 3
SYSTEMS FORE DEVELOPMENTAL SEQUENCES

Wilcox Area II

Child	Reading						Mathematics									Language					
	Visual			Comp.			Geom.			Num.			Phon.			Syntax			Semantics		
	Pre	Post	Dif.	Pre	Post	Dif.	Pre	Post	Dif.	Pre	Post	Dif.	Pre	Post	Dif.	Pre	Post	Dif.	Pre	Post	Dif.
1	22	25	3	2	4	2	2	5	3	7	7	0	26	30	4	16	23	7	43	52	9
2	36	48	12	13	12	0	21	32	11	20	25	5	33	53	20	35	54	19	62	74	12
3	30	33	3	2	4	2	9	13	4	11	18	7	36	39	3	31	42	11	62	72	10
4	25	31	6	2	5	3	2	8	6	8	13	5	26	29	3	37	29	12	57	66	9
5	19	22	3	4	6	2	0	6	6	3	5	2	21	24	3	15	16	1	32	46	14
6	17	19	2	5	7	2	0	7	7	3	5	2	19	25	6	14	16	2	35	49	14
7	21	24	3	2	4	2	0	6	6	4	8	4	20	24	4	26	31	5	38	55	17
8	19	20	1	1	3	2	2	4	2	5	8	3	18	25	7	16	27	11	36	49	13
9	27	28	1	1	1	0	1	2	1	3	4	1	19	26	7	36	50	14	45	58	13
10	15	17	2	1	2	1	2	8	6	1	7	6	13	19	6	17	31	14	43	53	10
11	22	30	8	2	3	1	0	10	10	5	18	13	32	46	14	5	23	18	5	32	27
12	27	32	5	2	4	2	6	10	4	3	12	9	21	24	3	21	26	5	30	48	4
13	11	15	4	0	0	0	4	6	2	4	5	1	24	28	4	15	21	6	38	65	10
14	36	40	4	10	12	2	12	17	5	16	16	0	28	36	8	36	39	3	61	61	4
15	27	35	8	8	9	1	5	7	2	4	14	10	32	36	4	35	38	3	46	58	15
16	31	35	4	8	9	1	16	16	0	8	13	5	29	34	4	26	29	3	49	56	9
17	22	24	2	0	3	3	10	10	0	5	7	2	25	29	4	22	32	10	53	55	3
18	22	24	2	2	4	2	3	6	3	3	7	4	26	27	1	34	46	12	45	55	10
19		*			*			*			*		21	28	7	27	35	8	49		6

*moved before posttest given

Wilcox - Area II

Table 4
GROSS AND FINE MOTOR SKILLS

Child	Gross Motor															Fine Motor												
	12-17 mo. (6)		18-23 mo. (11)		24-29 mo. (9)		30-35 mo. (8)		36-48 mo. (11)		48-60 mo. (7)		60-72 mo. (5)		Diff	18-23 mo. (15)		24-29 mo. (14)		30-35 mo. (21)		36-48 mo. (10)		48-60 mo. (12)		60-72 mo. (15)		Diff
	Pr	Po	Pr	Po	Pr	Po	Pr	Po	Pr	Po	Pr	Po	Pr	Po		Pr	Po	Pr	Po	Pr	Po	Pr	Po	Pr	Po	Pr	Po	
1	6	6	11	11	9	9	8	8	6	8	4	6	3	4	5	15	15	14	14	15	19	6	9	4	5	1	1	8
2 **																												
3	6	6	11	11	9	9	8	8	11	11	7	7	5	5	0	15	15	14	14	21	21	10	10	10	12	7	11	6
4	6	6	11	11	9	9	8	8	8	10	3	6	4	5	6	15	15	13	14	15	19	7	10	6	12	4	8	18
5	6	6	11	11	9	9	8	8	9	11	4	6	3	5	6	15	15	14	14	13	19	9	10	10	12	9	10	10
6	6	6	11	11	9	9	8	8	9	11	3	6	3	5	7	15	15	14	14	13	18	9	10	10	12	7	8	9
7	6	6	11	11	8	9	8	8	5	7	3	4	1	3	6	15	15	13	14	12	18	3	8	0	4	0	0	17
8	6	6	11	11	9	9	8	8	7	8	3	4	2	3	3	15	15	12	14	12	18	5	10	1	9	0	2	23
9	6	6	11	11	9	9	8	8	7	8	3	3	1	2	2	15	15	14	14	12	18	5	9	7	9	2	2	12
10	6	6	11	11	9	9	7	8	5	9	5	7	4	4	7	15	15	14	14	7	17	3	7	1	2	0	0	15
11	6	6	11	11	8	9	8	8	8	10	4	6	2	4	6	15	15	13	14	15	18	10	10	10	12	9	11	8
12	6	6	11	11	8	9	7	8	3	7	3	5	2	2	7	15	15	14	14	15	19	9	10	9	12	6	10	12
13	6	6	11	11	9	9	8	8	9	10	4	6	3	3	3	15	15	14	14	18	18	9	9	7	8	1	1	1
14 *																												
15	6	6	11	11	9	9	8	8	7	9	6	6	2	2	2	15	15	14	14	21	21	10	10	9	11	6	9	5
16	6	6	11	11	9	9	8	8	10	10	5	5	3	5	2	15	15	14	14	20	21	9	10	11	12	8	12	7
17	6	6	11	11	8	9	8	8	9	9	5	6	3	3	2	15	15	14	14	16	16	8	8	5	6	0	0	1
18	6	6	11	11	9	9	8	8	5	6	3	5	1	1	3	15	15	14	14	15	17	10	10	8	9	0	1	4
19 *																												

** pretest data not available

* moved before posttest given

Table 5

SYSTEMS FORE DEVELOPMENTAL SEQUENCE

Sunnyside - Area III

Child	Reading						Mathematics						Language								
	Visual			Comp.			Geom.			Num.			Phon.			Syntax			Semantics		
	Pre	Post	Dif.	Pre	Post	Dif.	Pre	Post	Dif.	Pre	Post	Dif.	Pre	Post	Dif.	Pre	Post	Dif.	Pre	Post	Dif.
1	30	53	23	5	9	4	11	32	21	11	24	13	27	30	3	40	46	6	58	67	9
2	21	36	15	2	7	5	8	20	12	4	10	6	29	30	1	24	25	1	40	43	3
3	26	31	5	6	8	2	10	21	11	7	18	11	27	30	3	35	38	3	48	53	5
4	23	37	14	3	9	6	3	24	21	2	7	5	19	26	7	26	26	0	36	48	12
5	39	48	9	10	11	1	26	33	7	19	24	5	26	45	19	58	60	2	68	82	14
6	15	32	17	0	6	6	6	13	8	5	7	2	24	26	2	24	33	9	19	37	18
7	21	42	21	3	11	8	14	31	17	9	22	13	19	30	11	17	23	6	46	63	17
8	22	39	17	6	10	4	10	27	17	3	9	6	24	33	9	21	28	7	41	68	27
9	11	24	13	1	2	1	3	4	1	2	5	3	12	14	2	4	8	4	27	31	4
10	36	43	7	10	12	2	19	34	15	12	20	8	28	29	1	27	35	8	44	53	9
11	19	31	12	2	6	4	3	10	7	1	8	7	20	28	8	12	14	2	24	29	5

Table 6
GROSS AND FINE MOTOR SKILLS

Sunnyside - Area III

Child	Gross Motor															Fine Motor												
	12-17 mo. (6)		18-23 mo. (11)		24-29 mo. (9)		30-35 mo. (8)		36-48 mo. (11)		48-60 mo. (7)		60-72 mo. (5)		Diff	18-23 mo. (15)		24-29 mo. (14)		30-35 mo. (21)		36-48 mo. (10)		48-60 mo. (12)		60-72 mo. (15)		Diff
	Pr	Po	Pr	Po	Pr	Po	Pr	Po	Pr	Po	Pr	Po	Pr	Po		Pr	Po	Pr	Po	Pr	Po	Pr	Po	Pr	Po	Pr	Po	
1	6	6	11	11	9	9	8	8	11	11	6	7	1	3	3	15	15	14	14	15	20	8	10	7	11	6	14	19
2	6	6	11	11	9	9	8	8	11	11	7	7	3	4	1	15	15	14	14	16	20	9	10	11	12	6	13	13
3	6	6	11	11	9	9	8	8	9	11	6	7	3	4	4	15	15	14	14	16	20	8	10	8	12	7	12	15
4	6	6	11	11	9	9	8	8	9	10	7	7	2	3	2	15	15	14	14	13	20	7	10	5	11	2	7	19
5	6	6	11	11	8	9	6	7	6	10	4	4	0	1	7	15	15	14	14	14	18	10	10	10	12	9	15	14
6	6	6	11	11	9	9	8	8	11	11	7	7	1	1	0	15	15	14	14	12	20	7	10	2	8	4	9	22
7	6	6	11	11	9	9	8	8	11	11	6	7	3	5	2	15	15	14	14	19	20	9	10	8	12	9	13	10
8	6	6	11	11	9	9	6	7	9	11	4	7	1	4	8	15	15	14	14	14	20	6	10	8	12		13	26
9	6	6	10	11	8	9	6	6	5	7	4	6	0	1	7	15	15	13	14	20	20	3	10	1	10	0	7	24
10	6	6	11	11	8	8	7	7	7	8	4	4	1	2	2	15	15	14	14	20	20	10	10	10	12	11	13	4
11	6	6	11	11	8	9	6	6	5	7	3	5	0	0	5	15	15	13	14	7	19	3	9	0	9	0	10	38

Table 7

DABERON - A SCREENING DEVICE FOR SCHOOL READINESS

Kenton - Area I

Child	Pre	Post	Difference	Months on Program
1	55	83	28	7
2	39	60	21	7
3**				
4	34	75	41	8
5	17	28	11	7
6	27	36	9	8
7	60	82	22	8
8	51	73	22	7
9	31	49	18	8
10	65	87	22	6
11**				
12	33	44	11	8
13*				
14*				
15	21	55	34	8

** pretest data not available
* moved before posttest given

404

Table 8

DABERON - A SCREENING DEVICE FOR SCHOOL READINESS

Wilcox - Area II

Child	Pre	Post	Difference	Months on Program
1	55	82	27	7
2	99	109	10	2
3	87	94	7	[illegible]
4	63	86	23	7
5	40	63	23	8
6	35	62	27	8
7	54	86	32	8
8	36	69	33	8
9	41	64	23	6
10	46	66	20	7
11	40	63	23	9
12	54	79	25	5
13	40	63	13	4
14*				
15*				
16	68	88	20	9
17	67	79	12	4
18	53	75	22	4
19	53	78	25	6

*moved before posttest given

Table 9

DABERON - A SCREENING DEVICE FOR SCHOOL READINESS

Sunnyside - Area III

Child	Pre	Post	Difference	Months on Program
1	83	96	13	4
2	55	74	19	5
3	54	77	23	9
4	35	66	31	5
5	99	107	8	5
6	48	82	34	5
7	62	84	22	9
8	50	83	33	9
9	22	52	30	9
10	70	89	19	9
11	32	60	28	7

Table 10

RUTLAND SOCIAL/BEHAVIORAL TEST

Kenton - Area I

Child	Socialization											Behavioral										
	Stage I (12)		Stage II (6)		Stage III (6)		Stage IV (6)		Stage V (1)		Diff	Stage I (7)		Stage II (5)		Stage III (7)		Stage IV (6)		Stage V (1)		Diff
	Pr	Po	Pr	Po	Pr	Po	Pr	Po	Pr	Po		Pr	Po	Pr	Po	Pr	Po	Pr	Po	Pr	Po	
1	12	12	6	6	5	6	4	5	1	1	2	7	7	5	5	4	5	4	6	0	0	3
2	11	12	6	6	6	6	3	6	0	1	5	7	7	5	5	5	7	5	6	0	0	3
3	12	12	6	6	5	6	4	6	1	1	3	7	7	4	5	3	5	5	5	1	1	3
4	12	12	6	6	6	6	5	6	1	1	1	7	7	5	5	6	6	5	6	1	1	1
5	9	11	5	6	3	4	2	4	0	1	8	5	6	5	5	2	2	4	5	0	0	2
6	7	9	4	5	3	4	2	2	0	0	4	5	5	3	4	1	1	2	3	0	0	2
7	12	12	6	6	6	6	5	6	1	1	1	7	7	5	5	5	6	4	6	1	1	3
8	8	11	11	6	2	3	2	3	0	0	7	6	7	4	5	2	4	3	5	0	1	7
9	12	12	5	6	5	5	4	4	1	1	1	7	7	4	5	4	4	3	5	0	0	4
10	12	12	6	6	6	6	6	6	1	1	0	7	7	5	5	5	7	4	6	1	1	4
11	12	12	6	6	5	6	5	6	1	1	2	7	7	5	5	6	7	6	6	1	1	1
12	12	12	5	6	3	5	2	4	0	1	6	4	6	4	4	2	4	3	4	0	0	5
13	12	12	6	6	5	6	5	6	1	1	2	7	7	5	5	4	7	4	6	0	1	6
14	12	12	6	6	6	6	3	6	1	1	3	7	7	5	5	3	5	3	4	1	1	3
15	8	9	1	4	1	2	1	3	0	0	7	4	9	1	4	0	2	1	3	0	0	12

Table 11

RUTLAND SOCIAL/BEHAVIORAL TEST

Wilcox - Area II

Child	Socialization Stage I (12)		Stage II (6)		Stage III (6)		Stage IV (6)		Stage V (1)		Diff	Behavioral Stage I (7)		Stage II (5)		Stage III (7)		Stage IV (6)		Stage V (1)		Diff
	Pr	Po	Pr	Po	Pr	Po	Pr	Po	Pr	Po		Pr	Po	Pr	Po	Pr	Po	Pr	Po	Pr	Po	
1	8	10	2	3	0	0	0	0	0	0	3	2	6	0	1	0	0	0	0	0	0	5
2 **																						
3	12	12	6	6	5	5	4	4	1	1	0	7	7	4	5	0	0	0	0	0	0	1
4	10	11	5	5	2	2	2	2	1	1	1	6	7	1	4	0	0	2	2	0	0	4
5	6	12	2	4	0	0	0	0	0	0	8	1	7	0	2	0	0	0	0	0	0	8
6	6	12	2	4	0	0	0	0	0	0	8	1	7	0	2	0	0	0	0	0	0	8
7	9	12	6	6	3	3	1	2	1	1	4	7	7	5	5	2	2	3	3	0	0	0
8	7	12	3	5	1	2	0	1	0	0	9	3	7	0	5	0	2	0	2	0	0	13
9	10	12	5	6	2	2	1	2	1	1	4	5	7	5	5	2	2	3	4	0	0	3
10	6	10	2	2	0	0	0	0	0	0	4	2	3	0	1	0	0	0	0	0	0	2
11	9	12	2	4	1	1	0	1	0	0	6	2	6	1	2	0	0	0	0	0	0	5
12	7	12	11	6	2	3	1	3	1	1	10	6	7	5	5	2	2	2	4	0	0	3
13	9	12	3	4	0	0	0	0	0	0	4	3	6	1	4	0	0	0	0	0	0	6
14 *																						
15 *																						
16 *																						
17	12	12	6	6	2	2	0	1	0	0	1	6	7	5	5	0	0	2	3	0	0	2
18	6	9	2	2	0	0	0	0	0	0	3	1	3	0	1	0	0	0	0	0	0	3
19 *																						

**pretest data not available
*moved before posttest given

Table 12

RUTLAND SOCIAL/BEHAVIORAL TEST

Sunnyside - Area III

	Socialization											Behavioral										
Child	Stage I (12)		Stage II (6)		Stage III (6)		Stage IV (6)		Stage V (1)		Diff	Stage I (7)		Stage II (5)		Stage III (7)		Stage IV (6)		Stage V (1)		Diff
	Pr	Po	Pr	Po	Pr	Po	Pr	Po	Pr	Po		Pr	Po	Pr	Po	Pr	Po	Pr	Po	Pr	Po	
1	9	10	3	6	5	6	2	2	0	0	5	7	7	2	3	2	5	0	0	0	0	4
2	12	12	6	6	6	6	3	5	0	0	2	6	7	5	5	1	4	2	2	0	0	4
3	12	12	6	6	6	6	3	4	0	0	1	7	7	5	5	5	7	3	3	0	0	2
4	12	12	2	4	0	3	1	1	0	0	5	2	6	1	3	0	3	2	2	0	0	11
5	12	12	6	6	6	6	6	6	0	0	0	7	7	5	5	7	7	5	5	0	0	0
6	12	12	2	3	1	2	0	1	0	0	3	6	6	4	4	5	5	0	0	0	0	0
7	12	12	6	6	5	6	1	2	0	0	2	7	7	4	4	2	4	2	2	0	0	2
8	12	12	5	6	4	6	2	4	0	0	5	7	7	4	5	6	6	4	4	0	0	1
9	11	11	6	6	0	1	0	0	0	0	1	6	6	1	1	1	1	1	1	0	0	0
10	9	12	0	3	1	3	0	1	0	0	9	5	5	1	1	0	0	0	0	0	0	0
11	5	9	1	4	0	0	0	0	0	0	7	3	4	1	1	0	0	0	0	0	0	1

Table 13

DABERON - A SCREENING DEVICE FOR SCHOOL READINESS

Afternoon Children

Child	Pre	Post	Difference	Months on Program
1	105	120	15	5
2	84	90	6	2
3	76	92	15	0
4	79	97	18	3
5	90	120	30	6
6	88	112	24	7
7	81	96	15	5
8	114	120	6	5
9	101	110	9	4
10	80	101	21	4
11	80	87	7	3
12	60	80	20	6
13	85	107	22	4
14	72	80	8	4
15	63	77	14	6
16	62	87	25	6
17	54	72	18	5

Title of Project: Speech Therapy Program

Location of Project: Redmond School District 2J
Redmond, Oregon

Population Served: 75 Speech Impaired Children

Funding Allocated: $28,230

Project Beginning Date: September 7, 1976

Project Ending Date: June 3, 1977

Background and Rationale:

This project was undertaken for two reasons. First, the large number of children who had been identified as having speech and language problems but were not receiving service because of lack of personnel. Second, it was felt that the addition of a Myo-functional therapist to the staff would be beneficial in strengthening the speech muscles and thus make the learning of the articulation defects easier and faster for the student. None of these children would have been served without VI-B funds.

Methodology:

The project was conducted by first screening grades K, 5, and 9 for speech problems and then screening all referrals. The children who had been enrolled in speech the last year was re-examined.

The Myo-functional therapist then screened most of these for muscular deficiencies and set behavioral objectives for each child to be seen.

The Speech Therapist then selected 55 children grades K - 6 and 3 of these from special education. Most of these were given the P.A.T. and an Artic specific sound test pretest.

The Oral Myo-functional therapist picked 20 of the children selected for speech from grades 4-12. These were children from the existing therapist and not the therapist on the Federal Grant. This gave us two separate populations.

The speech therapist worked using the Artic Program with her case load ending the year with the P.A.T. and Artic posttest.

Both speech therapists in the district and one from the Opportunity Center were given one hour a week to observe the Oral Myo-functional therapist at work.

The Myo-functional therapist also held several work sessions with the therapists and helped them develop special exercises for specific sounds. He also provided a ten step program for the speech therapist to follow in future years.

Objectives:

1. To increase the articulation skills of approximately 45 children between September, 1976 and May, 1977.

Evaluation: The Photo Articulation Test will be given on a pre/posttest basis. In addition the new behavior acquired by each child on the Universal Articulation Program will be listed and specified by child.

Results: Of 46 pupils pre and posttested, 46 increased articulation to the following levels:

13 were dismissed as corrected

31 were instructed to continue speech therapy

4 of which further therapy will depend on a reevaluation in September

27 of which were referred back in Fall 1977

2 were dropped from program because further therapy did not appear beneficial at this time or medical involvement was necessary in order to continue.

412

2. To increase fine motor behaviors for selected children.

Evaluation: A selected list of behavioral objectives will be designed for each child involved in the physical therapists portion of the project. Criteria levels of acceptable performance will be established for each objective and a list of these objectives achieved by each child participating will be specified at the conclusion of the report.

Results: The following behavioral objectives and performance levels were identified and applied all or in part to each individual treated.

1. Front part of tongue placement = Excellent Fair Poor
2. Midpoint part of tongue placement = Excellent Fair Poor
3. Back part of tongue placement = Excellent Fair Poor
4. Mouth breathing = Excellent Fair Poor
5. Speech (per speech therapists) = Excellent Fair Poor
6. Swallowing performance = Excellent Fair Poor
7. Subconscious control of behavioral patterns = Excellent Fair Poor
8. Lip strength = tested with force scale and reported in lbs. with brackets indicating at or above normal value.
9. Masseter strength - graded 1 through 5 per Georgia Warm Springs Rehabilitation Foundation criteria with 5 being normal.

Twenty individuals were selected from a population of 156 subjects who were determined to have coexisting speech and myofunctional involvements through screening by both services.

Two individuals completed the Myo-functional Program in the 5.5 months allotted. (The average program length was 12-14 months.) Two of the subjects demonstrated poor motivation and performance and one moved to Alaska shortly after program initiation.

Improvement with articulation skills was found to correlate closely with achievement of tongue awareness and control which was accomplished early in the Myo-functional Program in sixteen out of twenty subjects.

Eighty percent (80%) of the subjects successfully completed eighty percent (80%) or more of their behavioral goals.

The percent of programs completed refers to a time base for completion rather than a simple percentage of behavioral objectives successfully completed. This analysis incorporates more subjective factors such as subject motivation and learning skills.

Third Party Evaluator's Comments:

In reviewing the objectives and the data submitted by the project staff it becomes apparent that both objectives 1 and 2 were met.

Those data contained in Table 1 cover 46 students and their test results on the Photo Articulation Test and the Universal Articulation Test. The results of the tests indicate that the children increased their articulation skills during the treatment period.

The data submitted for objective 2 are contained in Table 2. Those data displayed in Table 2 indicate that the objective had been met. These data cover behaviors such as: Front, mid, and back tongue placement, mouth breathing, speech, lip strength, Masseter strength, swallow subconscious control and percent of program completed.

These data contained in Table 2 display gain in most of the students across behaviors.

The project staff made a statement that articulation skills correlate closely with achievement of tongue awareness and control. In reviewing the data contained in Table 1 we see gains made by children that did not have the benefit of the Myo-Functional Therapist Program. From the data submitted the statement should be that those individuals that improved in the area of tongue awareness improved in the area of speech. There were no pretest scores submitted. Only the sounds that the speech therapist corrected were contained in the pretest column.

The third party evaluator would like to thank the project staff for a timely and well written report. The project staff submitted additional comments that because of constraints placed on document size could not be included.

Table 1
Photo Articulation (PAT) and the Universal Articulation Pre- Posttest Results
N=46

Pupil	P.A.T.			Universal Articulation Test		
	Pre	Post	Dif.	Pre	Post	Dif.
1	9	0	-9	20	23	+3
2	3	0	-3	6	24	+18
3	9	0	-9	0	24	+24
4	0	0	0	23	24	+1
5	0	0	0	22	24	+2
6	0	3	-3	19	24	+5
7	0	1	-1	9	24	+15
8	0	3	-3	16	24	+8
9	1	0	-1	21	24	+3
10	11	4	-7	5	24	+19
11	2	0	-2	3	24	+21
12	9	0	-9	0	24	+24
13	9	3	-6	8	24	+16
14	22	10	-12	7	24	+17
15	6	0	-6	1	24	+23
16	6	0	-6	14	24	+10
17	9	6	-3	4	24	+20
18	12	9	-3	17	24	+7
19	5	0	-5	18	24	+6
20	6	0	-6	1	12	+11
21	6	0	-6	10	22	+12
22	0	0	0	10	19	+9
23	10	0	-10	17	21	+4
24	4	1	-3	11	15	+4
25	7	0	-7	21	24	+3
26	6	0	-6	1	24	+23
27	18	9	-9	0	21	+21
28	19	5	-11	0	24	+24
29	16	6	-11	14	24	_10
30	26	15	-11	0	20	+20
31	5	0	-5	22	24	+2
32	9	4	-5	10	24	+14
33	0	0	0	4	24	+20
34	3	0	-3	0	22	+22
35	10	0	-10	0	23	+23
36	9	3	-6	10	22	+12
37	6	0	-6	0	24	+24
38	7	5	-2	0	0	0
39	9	0	-9	0	23	+23
40	4	0	-4	0	20	+20
41	0	0	0	22	24	+2
42	19	17	-2	0	15	+15
43	9	6	-3	10	20	+10
44	24	21	-3	0	15	+15
45	23	20	-3	0	15	+15
46	30	25	-5	0	20	+20

Table 2

Summary of Individual Performance Per Behavioral Objectives Per Individual
N=20

Individual	Front Tongue Placement		Mid Tongue Placement		Back Tongue Placement		Mouth Breathing		Speech	Lip Strength (lbs.)		Masseter Strength (1 - 5)		Swallow		Sub-Conscious Control		Percent of Program Completed
	Pre	Post	Pre	Post	Pre	Post	Pre	Post	Post	Pre	Post	Pre	Post	Pre	Post	Pre	Post	
1	P	EX	P	EX	F	EX	P	EX	EX	2.0	[4.5]	4	5	P	EX	P	F	70
2	P	EX	P	EX	P	EX	P	F	EX	3.25	[6.0]	3-	5	P	EX	P	P	65
3	P	EX	P	EX	EX	EX	P	F	EX	2.50	[5.25]	5	5	P	EX	P	F	50
4	P	EX	P	EX	EX	EX	P	EX	EX	2.50	[6.25]	3	5	P	EX	P	EX	95
5	P	EX	P	EX	EX	EX	P		F	1.50	3.0	4-	5	P	EX	P	P	35
6	P	EX	P	F	F	EX	P	P	EX	1.75	2.5	3	4	P	F	P	P	10
7	P	EX	P	EX	F	EX	P	F	EX	1.25	[4.5]	5	5	P	EX	P	F	70
8	P	EX	P	EX	EX	EX	P	F	EX	2.0	[6.0]	3	5	P	EX	P	F	50
9	P	EX	P	EX	F	EX	P	EX	EX	2.5	[5.5]	4	5	P	EX	P	F	55
10	P	EX	P	F	F	EX	P	F	P	3.75	4.75	4	5	P	F	P	P	25
11	P	EX	P	EX	EX	EX	P	EX	EX	3.25	[6.0]	3	5	P	EX	P	F	70
12	P	EX	P	EX	EX	EX	P	F	EX	3.0	[5.25]	3+	5	P	EX	P	F	60
13	P	EX	P	EX	F	EX	P	F	EX	2.25	4.0	3-	5	P	EX	P	F	60
14	P	EX	P	EX	EX	EX	P	EX	EX	2.75	[6.25]	3	5	P	EX	P	EX	100
15	P	EX	P	EX	P	EX	P	F	EX	2.0	3.30	2	4+	P	EX	P	F	60
16	P	EX	P	F	F	EX	P	F	F	2.50	[4.5]	3-	4+	P	F	P	F	50
17	P	EX	P	EX	P	EX	P	F	F	1.50	4.0	2	5	P	EX	P	F	45
18	P	EX	P	F	EX	EX	P	F	EX	2.0	4.0	4	5	P	F	P	F	40
19	P	EX	P	EX	F	EX	F	EX	EX	3.0	[4.5]	3	5	P	EX	P	EX	100
20	P	EX	P	F	P	EX	P	EX	EX	3.25	[4.75]	4	5	P	F	P	EX	85

Key: EX - Excellent
F - Fair
P - Poor

Title of Project:	Redmond High School Handicapped Program
Location of Project:	Redmond High School
Population Served:	Educable Mentally Retarded
Funding Allocated:	$22,000
Project Beginning Date:	August 30, 1976
Project Ending Date:	June 3, 1977

Background and Rationale:

Before funding of the program there were two counselors serving approximately 1,200 students at the high school. One counselor had voluntarily taken on the task of helping arrange the transition from the junior high program to the high school program, helping students schedule classes, and arranging tutors for those students and classes. He also attempted to take care of the problems that arose; either staff problems in taking these identified students and/or student problems in adapting to the high school.

The method by which student programs and classes were determined was somewhat haphazard. There was not a systematic identification of student needs. A placement was based more upon the rationale of finding a place where the student could "get along," rather than in finding opportunities to meet individual needs. Criteria used were: (a) class load, (b) teacher consent, (c) student interest, (d) availability of student tutors, and (e) appropriateness for the students.

Once a student was placed in a regular classroom, the teacher received little or no preparation or orientation in educating that student. This method was oriented to meet the needs of the "system" rather than the needs of the individual. More often than not, the students ended up "helping" the janitor sweep floors half the day, with no goals or objectives established.

The project was undertaken to correct these educational gaps. There was a need for an instructor to direct, coordinate, and teach in a program for the identified EMR students. A systematic, monitored program of evaluating student needs, placement, and progress needed to be established There was also a need for inservice and direct individual help for teachers with the identified students in their classes.

Methodology:

During the first year of funding, a professional with training in special education was hired to eliminate or begin to eliminate the weaknesses and educational gaps that have been indicated in the section "Background and Rationale."

The teacher was not selected prior to school starting and did not begin work until October 6, 1976. Students were already registered in classes and had already been dropped from some.

The teacher began first to establish control of student schedules and got students "settled down" into a daily routine of class attendance.

The teacher then began to direct, coordinate and teach within the program for the identified EMR students. A systematic program of assessment of individual competencies and needs was conducted. Although the students were placed in regular classes, they also met with the special education teacher for math and reading instruction.

An individual orientation was conducted for regular classroom teachers which consisted of: an explanation of the program, a discussion of the social and behavioral expectancies, appropriateness of particular classes to meet the needs of individuals and levels of achievement in relation to other students and the EMR student himself.

The teacher established a system to monitor students' behavior and progress in classes so the problems were dealt with before they were beyond reconciliation.

The teacher established himself as a resource person to teachers in the regular classroom; helping to provide methods and materials for instruction of indivdiual students and provide short term, additional instruction for the EMR students in the regular classroom subject matter.

Objectives:

1. To increase academic skills for each student that is in the EMR program at the high school level (Area 1 and Area 4 of the Toward Competency Guide).

Evaluation: Pre and posttest measurement will be conducted using the Toward Competency Guide for each student.

The students enrolled in this program improved 74% of the competencies in Area 1 of the Toward Competency Guide.

In Area 4 of the Toward Competency Guide the students improved 72%.

2. To increase the number of job try-outs for each student enrolled in the EMR program.

Evaluation: A log will be maintained which will include the following information: the length of the try-out, the type of try-out, and the reason for termination. These data will be recorded and reported.

Results: The seven students enrolled in the program held nine jobs during the school year. Of these nine jobs, six were provided by the Redmond School District (See Table 1).

Table 1

Jobs Held by Students Enrolled in Class for the EMR
N=7

Student	Work	Dates	Explanation
1	RHS Food Service	1-17-77 6-7-77	School year ended.
2	RHS Food Service	10-11-76 10-29-76	Termination requested by Food Service Director. Unable to cooperate with other workers, or follow directions.
3	RHS Food Service	11-1-76 3-11-77	Getting new job.
	Yard Worker	11-4-76 11-10-76	Work completed.
	City of Redmond, Laborer	4-4-77	Full time employment.
4	RJHS Janitor	10-4-76 3-15-77	Funding exhausted.
	RJHS Janitor	5-16-77	Continue through summer.
5	Thrifty Market, Stockboy	8-23-76 11-20-76	Ended by parent request.
	RHS Food Service	10-11-76 6-7-77	School year ended.
6	Dishwasher, Restaurant	4-15-77	Continue through summer.
7	Farm Laborer	4-2-77	Terminated/poor attendance, attitude, general work habits.

Third Party Evaluator's Comments:

Those data displayed by the project staff in Table 1 and the results section for Objective 1 indicate that the objectives for the project have been met. The third party evaluator would like to suggest the requirement of additional job training sites in the community. This would provide a realistic setting in which to assist the student in acquiring those skills necessary to maintain employment in the community.

Title of Project:	Adjustive Education for the Emotionally Handicapped
Location of Project:	Douglas County School District #4 Roseburg
Population Served:	Extreme Communications Disorders-Autistic and Emotionally Disturbed Secondary School-Age Children
Funding Allocated:	$34,567
Project Beginning Date:	July 1, 1976
Project Ending Date:	June 30, 1977

Background and Rationale:

Prior to the application for this Title VI-B grant, the Roseburg School District had already been involved in attempting to implement more comprehensive services for the handicapped children in the district. In the process of prioritizing the needs of children in the various handicapping categories, it was determined that those children identified as emotionally disturbed, at the secondary level, and those children identified as autistic, should be considered and planned for in a more systematic manner than had previously been possible.

Addressing the problem of secondary school emotionally disturbed children first, the district contacted all available sources and agencies in their effort to determine how many children there were, both in school and out, who were not receiving educational services commensurate with their needs. Since many of these children had already dropped out of school or had been suspended, the first step was to develop a means for facilitating the return of those who had already dropped out, as well as developing a program for them and for those who were in danger of being "invited" out of school. Since emotionally disturbed children very often exhibit learning disabilities, and vice versa, a program was to be designed to meet both of these needs on an individual, child to child basis, because of the constraints under which regular classroom teachers work.

Those children diagnosed as autistic, though small in number, were just beginning to have their problems addressed within the district, and the financial requirements were considerable. The incidence of autistic children in Roseburg was considerably higher than would be expected statistically. Nonetheless, the district felt morally obligated to offer an educational program for these youngsters. Research data from other states indicated that most of these handicapped children can function in school settings and with highly structured environment and appropriately individualized educational programs, they can make considerable gains.

Methodology:

The implementation of the program for the autistic children in the district was very smooth since the resource teacher and two of the paraprofessionals had already begun the development of the program for several children enrolled. The project funds allowed additional personnel to be employed and trained in the procedures and methods necessary to implement the highly structured and individualized programs for these children. In a one on one setting, each of the children was assessed as to which skills they possessed, and those skills which should be introduced and mastered next. With this profile in hand, the staff was able to develop a series of receptive and expressive language objectives, and a series of objectives for the development of appropriate behaviors as well as the decrease of inappropriate behaviors. Because of the nature of the handicapping condition exhibited by these children, objectives were broken down into minute steps in a hierarchy, and were reinforced in a very systematic and consistent manner. Upon initiation of each new concept or objective, direct ratio data were collected until mastery had been established on a fairly reliable basis. Thereafter, maintenance data was collected at approximately four week intervals, as a re-confirmation that this skill was indeed mastered.

The secondary school Title VI-B program presented a somewhat more complex problem to sort out and implement; the major one being that of communicating to the regular staff those students who might or might not be potential candidates for the program. A checklist of those behaviors which could indicate some difficulty was developed as a means of initially targeting students who might benefit from this type of instruction and assistance. This was given to the regular staff, and proved to be a fairly satisfactory gross screening device. Regular staff members filled out this form for a child they felt should be seen, and gave it to the Adjustive Education teacher in their building. An appropriate diagnostic assessment was then scheduled (with parental permission) and a decision made as to the disposition of that child and his needs. If it was decided that the child's needs could not be met with some relatively minor adjustments in the regular classroom, he was assigned to the Adjustive Education class for that amount of school time deemed necessary for him to successfully cope with himself, his relationships with the institution, and with his peers.

Once in the Adjustive Education class, the teacher began the process of taking baseline on the student's classroom behavior skills and his academic/problem solving skills. This data was then a basis for discussion in a conference the teacher and the student had, in which together they decided upon those skills or behaviors which were already mastered and those which were not yet in the student's repertoire. The students monitored most of their progress themselves, with the teacher only supporting this behavior, and making weekly or monthly probes to verify reliability of data.

Objectives:

1. To increase or decrease (and/or eliminate) appropriate or inappropriate behavior for secondary school age emotionally handicapped students.

Evaluation: Pinpoint the behavior, baseline data will be collected, a program will be designed and implemented with a specific criterion level of acceptable performance. Interim data will be collected until criterion level of acceptable performance is reached. Probe data will be collected for the specified behavior to monitor its maintenance.

Results: Since this was a very individualized program, the pinpointed behaviors were extremely varied, but the year end analysis of these behaviors indicated that they could be subsumed under six general categories.

(a) In class on task behavior. Although the students were in the Adjustive Education Class for varying periods of time, 68% of the students who had this behavior written as an objective met criteria.

(b) Talk-outs. After taking baseline data on talk-outs, it was noted that this behavior decreased very rapidly, with only three students having to continue with this objective over a long period. Apparently simply drawing their attention to the behavior in a positive manner was enough to extinguish this behavior in most instances. Of the three students who had to struggle with this for a longer period of time, two of them did succeed in significantly decreasing their rates of talk-outs in class.

(c) Participation in class discussions. Two of the students targeted for inclusion in the Ad-Ed classes appeared to have a great deal of difficulty with responding or interacting verbally during class or group discussions of any sort. One student reached criterion level of three comments per class lesson, while the other ended up having to have a talk-out objective written into the program.

(d) Decrease aggressive behavior. Both verbal and physical aggressive behaviors were included in this category, with the greater number of students having a decrease in verbal aggressions (put-downs) written as part of their program. Seventy-three percent of these students met and maintained criterion.

(e) Tardies. The teachers noted that many of the referred students experienced difficulties with getting themselves and their books and papers organized, with the result that they all had a voluminous collection of tardy slips. With a decrease in tardiness to class as an objective, 68% of the children met and maintained criterion.

(f) Regular attendance at school. Avoidance of uncomfortable situations seemed to be a high-incidence behavior among these students, and one that is difficult to extinguish. Of those children who had this component written into their objectives, only fifty percent met and maintained criterion. An interesting phenomenon during this past year has been that when teachers, paraprofessionals and peers were openly supportive about regular attendance, the behavior maintained. When the reinforcers were faded out, the behavior deteriorated significantly, leading the teachers to believe that it would be better written as a long term objective, rather than short term.

2. To increase the number of hours the secondary school aged emotionally handicapped students will spend in the regular classroom.

Evaluation: A log will be maintained to record the number of hours each student spends in the regular classroom and in the classroom for the emotionally handicapped.

Results: The target students all began their initial placement in the Adjustive Education class on a full-time basis. This placement was effected to accomplish a complete behavioral assessment, which would pinpoint appropriate and inappropriate behaviors. The word full-time also was varied in that to some of the dropouts "full time" meant half days. It would be meaningless to reduce all the varied amounts of attendance in regular classes, to an 'average' and it might be considered somewhat excessive, in terms of the constraints of this format, to list each student separately. However, it can be stated that of the students enrolled in the program, only three were unable to cope with regular class attendance and needed to stay in the Ad-Ed class the entire day. The rest of this population were attending regular classes from a minimum of three periods per day to a maximum of all periods per day, except for one period a week spent in the Ad-Ed resource room.

3. To increase the receptive and expressive language of each child enrolled in a program for the autistic.

Evaluation: The behavior will be pinpointed, baseline data will be collected, a program will be designed and implemented (using Non-Slip and/or Schaeffer Language Program). Interim data will be collected until criterion level of acceptance performance is attained. Probe data will be collected as to the maintenance of the behavior.

Results: There were four children in this program, and the results presented on an individual basis are as follows:

Student # One: met and maintained criteria on 4/4 objectives.

The four objectives were: responding to verbal commands ("put, bring, come here"), identifying objects on Peabody cards, increasing the volume of his voice, and increasing his speaking vocabulary.

Student # Two: met and maintained criteria on 5/6 objectives.

The five objectives on which he met and maintained criteria were: increasing appropriate response to the cue "do this," increasing appropriate response to the cue "say _____," increasing appropriate response to the cue "sign _____," increasing appropriate response to the cue "point to the (color) card," and increasing appropriate response when presented with an action-agent card. The data for this last objective indicate that when presented with two familiar action-agent cards, 100% accuracy was easily reached. However, when presented with one familiar and one unfamiliar action-agent card, accuracy was extremely uncertain. The teacher noted that this response was similar in other discrimination programs the student was involved in, with the exception of the Non-Slip program.

Student # Three: met and maintained criteria on 4/4 objectives.

The objectives were: increasing appropriate response to the cue "do this," increasing appropriate response to the cue "say MMM," increasing appropriate response to the cue "sign pretzel," increasing appropriate response to the cue "sign meat." The responses were very uneven when the cues for signing pretzel and meat were given in changed order, but the response rate went from 0 to 90% and maintained this high level over a period of three months.

Student # Four: met and maintained criteria on 5/5 objectives. This student's five objectives were: increasing appropriate response to two-part commands, increasing appropriate verbal speaking by speaking slowly, increasing appropriate response to the cue "find one that is the same," increasing appropriate response to the cue "find one that is different," and decreasing his 'puppet voice' verbalization. The graphs of data on his responses to the matching objectives show that when new concepts were introduced, the initial correct response rate would be zero, but that in almost every instance, would move up to 80% correct or over within two days.

4. To increase or decrease (and/or eliminate) appropriate or inappropriate behavior of children enrolled in the program for the autistic.

Evaluation: Pinpoint the behavior, design and implement a program with a specified criterion level of acceptable performance, collect interim data until criterion level is reached. Probe data will be collected to monitor maintenance of the behavior.

Results:

Student # One: Increasing hands-in-lap behavior during lessons until objective was met and maintained. Decreasing self-stimulatory behavior during lessons objective was reduced from 27 per lesson to 14 per lesson. Decreasing aggressive behavior objective was met and maintained. Increasing appropriate toileting behavior was met and maintained.

Student # Two: There were three behavioral objectives set for this student. The frequency of his self-mutilative behavior was decreased and maintained. Frequency of nose-picking behavior was reduced from a high of 86 picks per day down to 10 picks per day. Increasing his self-help skills - i.e., tying shoes went from a baseline of being only able to lace his shoes to being able to lace and complete all seven steps involved in tying shoes independently.

Student # Three: This student met and maintained all five of the behavioral objectives set for him in the program. The objectives were: increasing hands-in-lap behavior on cue (0% to 100%), increasing eye-contact behavior during lessons, increasing appropriate toileting behavior, decreasing frequency of tantruming behavior (high of 13 to 0 per day), and increasing his self-help skills from no skills at all to 14 (including such tasks as eating independently and tying his own shoes).

Student # Four: This student met and maintained criteria on frequency of crying behavior during lessons and directed activities, decreasing the frequency of vomiting behavior during lessons and directed activities, increasing his eye-contact behavior during lessons and conversations, increasing his hands-down behavior when sitting and/or walking, and/or running, as well as learning all seven steps involved in the shoe-tying program.

Third Party Evaluator's Comments:

This project contained two major components. The class for autistic children operated from the beginning of the project with a structure and set of objectives which were more clearly delineated than the Adjustive Education class. This was due, basically, to two major reasons: (1) the number of students and the behaviors addressed in the classroom for autistic are fewer and generally less complex than found in the Adjustive Education class, and (2) the Adjustive classroom methods and procedures had to be developed as the project progressed, while methods and procedures in the classroom for the autistic were based on proven methods and procedures utilized with this population of children.

In both components of this project the evaluator found good educational practices and progress being made by participants. The classroom for autistic presented data which indicated excellent progress with a population of children who typically progress very slowly. Visits to this class by the evaluator validated this progress. The Adjustive Education class, while experiencing some difficulty at the beginning, accomplished much with secondary level emotionally handicapped students.

In the evaluator's opinion, this project met all of their stated objectives.

Title of Project: Full Services Project
Location of Project: Roseburg, Oregon
Population Served: Various Handicapping Conditions
Funding Allocated: $50,000
Project Beginning Date: October 1, 1976
Project Ending Date: June 10, 1977

Background and Rationale:

The Title VI-B project conducted by the Douglas County Intermediate Education District's Multiple Handicapped Program was based on three underlying assumptions and corresponding identified needs.

1. Unserved severele/profoundly handicapped children can be best served by individualized one-to-one therapy and stimulation sessions. Eight severely/profoundly handicapped children were identified who were either too young or physically incapable of participating in existing Multiple Handicapped classes. Many of these children were seen once weekly by homebound trainers (Title VI funded). Adequate homebound programs were costly (transportation costs and travel time) and excluded these children from direct contact by the Multiple Handicapped program's specialists.
2. Severely handicapped children can be successfully integrated into regular day care, preschool and public school programs if the staff is provided with appropriate training and assistance. The Multiple Handicapped Program had no staff designated and responsible for integration of severely handicapped students into public schools. Teachers had expressed that the existing follow-up and consultation services were inadequate. Local day care centers, preschools, Head Start, and public schools had indicated a willingness to integrate Multiple

Handicapped children if they were provided with: individualized prescriptive programs, training, technical assistance and consultation.

3. Learning problems of handicapped children can be prevented or ameliorated if appropriate language and motor programs are provided at the preschool level. Forty-eight preschool children (ages 2-6) had been identified who would require individualized prescriptive language or motor programs. Fourteen of those children were currently unserved. Also, there were currently twelve Head Start children (with considerable language delay problems) who were receiving any services from a trained speech pathologist. There were no speech therapy services available to preschoolers (in Douglas County) other than services provided to preschoolers in the Multiple Handicapped Program. There were 36 preschool children receiving services from the Multiple Handicapped Program, but 14 of those children were seen only once a week. If unserved, a large percentage of these children would not have the necessary language and motor skills for regular first grade programs. Research data supported the fact that these children comprise a majority of the first graders who are identified with learning problems.

Methodology:

The project staff included: a speech pathologist, integration specialist, half-time occupational therapist, preschool integration specialist (paraprofessional), one full time aide and two half time aides.

The integration specialist was responsible for follow-up of all handicapped students that had been mainstreamed by the Multiple Handicapped Program and for physically handicapped students who had never been served by the Multiple Handicapped Program. The integration specialist was responsible for observing mainstreamed students, providing information to teachers (concerning the handicapping condition), providing adaptive materials, providing adaptive equipment, arranging integration placements for students in the Multiple Handicapped classroom and writing appropriate programs for the severely handicapped students who were integrated during the 1976-77 school year. The integration specialist was also responsible for providing an informational inservice for schools where severely handicapped students had been mainstreamed.

A full time aide was responsible for implementing programs with four severely physically handicapped students who had been mainstreamed in the same elementary school. A part time aide was responsible for assisting with toileting and typing programs for the severely handicapped students who were mainstreamed in different schools.

The speech pathologist and preschool integration specialist were responsible for serving the handicapped preschool children who were placed in local preschools and Head Start classes. The integration specialist screened seventy-six preschool children who were referred to the Multiple Handicapped Program (using the Developmental Profile). The speech pathologist assessed the forty-five preschoolers who were found to be delayed a year or more in speech or language (utilizing the Carrow Test of Auditory Comprehension of Language and the Goldman-Fristoe Test of Articulation). The speech pathologist determined that thirty-eight of the preschoolers were significantly delayed in speech or language: (1) six of the children were placed in the Multiple Handicapped Program, (2) seventeen were placed in local preschools or Head Start classes, (3) fifteen children received consultative services from the speech pathologist. The speech pathologist also trained five preschool teachers and three parents to implement and collect data on language programs.

The occupational therapist and part time aide were responsible for providing programs for the four severely/profoundly handicapped students who were served by this project. The occupational therapist developed programs for feeding, sensory stimulation, desensitization, and positioning for each student. The aide was responsible for implementing and collecting data on the programs. The occupational therapist also developed programs for three of the physically handicapped students who were mainstreamed and provided feeding programs for six of the children in the Multiple Handicapped Program preschool.

Objectives:

1. To provide therapy and stimulation learning to unserved severely/profoundly handicapped children (who are physically uncapable of participating in existing multiple handicapped classes).

Evaluation: Pre- posttests will be administered: SEED Gross Motor, C.C.D. Upper Extremities, Reel Scale, and the Douglas County I.E.D. Preschool Assessment.

Results: Therapy and stimulation programs were provided for three students on a M/W/F schedule and the fourth child was on a regular five day per week schedule. Attendance seemed to have a direct effect on the number of programs initiated and the number of programs where the student reached criteria. The high rate of absences (due to illness) was anticipated for this population of handicapped children.

Table 1 shows the test results and the number of programs the student's completed (met criteria).

The following are examples of types of programs that were implemented: tracking light, head control on verbal cue, sitting supported, vocalizing sounds, chewing, sucking from straw, toilet training, signing, reaching for object, ect.

2. To integrate moderately/severely school aged handicapped children into regular day care centers, preschools, and public school programs.

Evaluation: The following data will be recorded and reported - the number of placements, the duration of the placement, the reasons for termination, the number and type of programs designed and implemented, the number of programs which criteria was reached. Specify list of problems met by regular classroom teacher and/or Title VI-B staff, teacher's willingness to continue with handicapped children. Selected pre- posttests will be administered to children: the Douglas County IED Preschool Assessment and/or the Goldman-Fristoe, and the Carrow.

Results: A total of 98 preschool-age children were referred to the Multiple Handicapped Program. Seventy-six of these children were assessed and forty-four children were determined handicapped (four were mentally retarded, two were hearing impaired, thirty-eight were speech/ language impaired).

The following battery of tests were administered for the preschool assessment: Peabody Picture Vocabulary Test, Boehm Test of Basic Concepts, Daberon, Beery Developmental Test of Visual-Motor Integration, Carrow Test of Auditory Comprehension of Language, Goldman-Fristoe Test of Articulation, Memory for Digits and Memory for Sentences.

Thirty-five handicapped preschoolers received services from the project staff. The integration specialist placed eighteen children in Head Start or local preschools. The speech pathologist provided direct services to 17 children and consultative services to 16 children. The occupational therapist provided direct services to six children and consultative services to five children. Six of the children were placed in the Multiple Handicapped Program.

Thirteen different preschool placements were utilized. Only three of the placements were terminated and each by the parent due to a move or insufficient funds. The integration specialist arranged for funding four of the children's placements.

Each preschool teacher (13 teachers) indicated on a questionnaire that: (1) the placement was appropriate; (2) their greatest need was for speech/language programs; (3) they were willing to have another handicapped child, and that; (4) they would attend inservice training.

Table 2 gives a summary of the speech and language programs provided for the handicapped preschoolers who were mainstreamed.

This project provided the following services to physically handicapped students mainstreamed in the public school setting. Four of the severely physically handicapped students from the Multiple Handicapped Program classroom were mainstreamed full time by the integration specialist. Twenty individualized programs were written, sixteen were completed and four are on-going. Most of the programs concentrated on classroom behavior such as: working independently, raising your hand, decreasing teacher attention, etc. Two of the children were on typing programs for written communication. A full time aide was responsible for implementing the specific programs. She was also responsible for providing all physical assistance needed by any of these children.

The integration specialist provided consultative services for fifteen students who had been mainstreamed full time after being in the Multiple Handicapped Program (mainstreamed prior to the 1976-77 school year). The services consisted of: teaching student's transfer techniques, adapting regular lessons for the physically handicapped, providing supplemental materials, modifying physical education activities, providing specific information to teachers concerning the student's handicapping condition, providing adaptive equipment, arranging for therapy evaluations, and observing the student to evaluate the appropriateness of the placement.

The integration specialist also provided consultative services to ten physically handicapped who were mainstreamed but had never been in the Multiple Handicapped Program. These services involved: arranging for services from the physical and occupational therapists, providing adaptive equipment, specifying appropriate physical education activities, arranging for someone to assist two students in the bathroom, and providing staff inservice on handicapping conditions.

The integration specialist made arrangements for nine of the severely handicapped students (in the Multiple Handicapped Program) to be integrated into music, library and some physical education activities. An aide from the Multiple Handicapped Program accompanied individual students to these activities.

A questionnaire was sent to the teacher of the mainstreamed students to help us determine how they felt about the placement. Twenty-five questionnaires were mailed and nineteen were returned. Seventeen teachers felt the placement was appropriate. Seventeen of the teachers felt the services provided by the integration specialist were appropriate. Eighteen teachers said they would take another physically handicapped student in their classroom. Seventeen of the teachers expressed a willingness to attend inservice training if the services were provided.

Third Party Evaluator's Comments:

Two significant outcomes of this project should be emphasized. First, in relation to objective 1 and the underlying assumption on which this objective was based, severely/profoundly handicapped children do make significant progress with individualized one-to-one programming. The data presented verifies this progress in both pre- posttest scores and completed programs. As pointed out in the results section of this report, additional progress was affected only by attendance problems.

Second, the successful integration of handicapped children into regular programs can be accomplished with adequate support to the child and the regular class teacher. The Douglas County IED Multiple Handicapped Program has demonstrated that an IED program is a viable approach to providing such support services.

Measurement techniques and data presented in this project more than support the success of the intended outcomes. In the evaluator's judgment this project has attained the stated objectives.

TABLE 1
SUMMARY OF PROGRAMS FOR SEVERELY/PROFOUNDLY HANDICAPPED

Age/Diagnosis	No. of days of attendance	No. of days parent partic.	Reel Fall Score	Reel Spring Score	C.C.D. Fall Score	C.C.D. Spring Score	SEED Fall Score	SEED Spring Score	Motor Prog.	Lang. Prog.	Self Help Prog.
#1 14 yrs. Profound Retard. Severe C.P. (Quad) Severe Seizure Disorder	55 (80 possible)	8	(e)4-5m (r)5-6m	(e)4-5m (r)10-12m	2m	2m	3.9 yr.	3.9 yr.	2 comp 7 on-go	0 comp 4 on-go	2 comp 1 on-go
#2 4 yrs. Legally blind Severe C.P. Severe Seizure Disorder	85 (95 possible)	21	(e)4-5m (r)N.S.	(e)9-10m (r)10-11m	6-8m	8-10m	3-6m	8-9m	9 comp 5 on-go	5 comp 3 on-go	7 comp 2 on-go
#3 4 yrs. Hydracephallic Severe C.P. Severe Brain Damage	69 (80 possible)	8	(e)N.S. (r)5-6m	(e)10-11m (r)2-4 yr.	4-6m	4-10m	2m	4m	4 comp 2 on-go	8 comp 3 on-go	2 comp 2 on-go
#4 5 yrs. Severe Brain Damage Emotionally Disturbed	159 (167 possible)	3	(e)5-6m (r)7-8m	(e)16-18m (r)18-20m	12m	12-18m	12-18m	2 yr.	5 comp 3 on-go	18 comp 6 on-go	7 comp 2 on-go

C.P. - Cerebral Palsy
(e) - Expressive language
(r) - Receptive language

m - months
comp. - completed
on-go - on-going

N.S. - Not Scoreable

Table 2

Summary of Language Programs

Child	Carrow Pretest	Carrow Pretest Score	Carrow May Score	No. Lang. Programs Implement.	No. Lang. Programs On-Going	No. Lang. Program Criteria
1	Nov.	N.S.	N.S.	93	25	68
2	Jan.	5.4	6.9	62	7	55
3	Feb.	4.0	5.8	44	10	34
4	Jan.	N.S.	N.S.	49	9	40
5	Dec.	N.S.	4.8	61	9	52
6	Nov.	N.S.	5.4	67	11	58
7	Dec.	3.3	5.4	41	5	36
8	Oct.	6.3	6.4	60	2	58
9	Dec.	3.2	3.5	21	4	17
10	Sept.	3.1	4.8	40	5	35
11	March	3.3	5.1	62	8	54
12	Sept.	N.S.	4.2	110	45	65
13	Sept.	5.2	6.1	40	10	30
14	Sept.	N.S.	4.2	35	10	25
15	Sept.	3.2	4.2	30	0	30
16	Sept.	N.S.	M	23	13	10
17	March	3.3	4.10	8	0	8
			TOTALS	846	173	675

N.S. means not scoreable
M means moved

*Average gain on standardized tests was two years.

Title of Project: Classroom Intervention for Emotionally Handicapped

Location of Project: Marion Intermediate Education District

Population Served: Emotionally Handicapped

Funding Allocated: $21,308

Project Beginning Date: August 23, 1976

Project Ending Date: June 22, 1977

Background and Rationale:

Prior to the 1975-76 school year, there have been no direct intervention services for the emotionally handicapped in Marion County. Limited indirect services were previously available, which provided screening, evaluation and prescription, but no direct follow-up beyond a written report.

In a 1974 needs assessment, districts indicated as a high priority additional services through the I.E.D. for the emotionally handicapped. A follow-up study committee was formed in 1974-75 and they undertook the task of providing recommendations for services to meet these needs. After a follow-up needs assessment, visitation of other district programs, and meeting with other agencies, the committee's first priority recommendation was to implement a resource staff intervention model for elementary districts. A second priority was a resource room intervention model for junior and senior high school districts.

From this information the project was designed to serve the needs of the emotionally handicapped. The first phase would be to provide direct services to elementary children in grades K-6 in the classroom setting.

Methodology:

The project staff consisted of one FTE Emotionally Handicapped Specialist with a Masters Degree in Education of the Emotionally Disturbed and Neurologically Impaired, and one 2/3 FTE Assistant with a B. S. in Speech Pathology. The project specialist also had experience in residential and public school programs for the emotionally disturbed. Additional training was also obtained through the OCE Model Center for skills in diagnostic/ prescription team evaluations.

Districts were given guidelines for referring children which required the completion of a written referral, SEA checklist and parent permission for evaluation. Upon receipt of the above forms, follow-up was initiated. The follow-up included classroom and/or home observation and conference. Also, a diagnostic evaluation (educational and/or social/emotional) was completed prior to the development of an intervention plan.

There were four intervention and follow-through strategies used:

(1) Counseling--training was provided for children to understand behavior through the use of stories, art work, play therapy, puppets, games, values clarification, role playing and adult encouragement. This method was of particular use to students diagnosed as withdrawn or of low self-esteem. Data were gathered from the Walker Problem Behavior Checklist and the Coopersmith Self-Esteem Inventory.

(2) Individual behavior programs--target behavior was pinpointed, baselined and then pursued through a variety of behavior modification techniques such as contracts, successive approximation, peer reinforcement and peer modeling.

(3) Teacher strategies--teachers were trained in methods of classroom behavior management to deal with target children or entire classrooms.

Some techniques used were student councils, peer and adult modeling, natural and logical consequences, contracting, token economics and group discussions.

(4) Home intervention plans--parents were trained to deal with their children's behavior in the home by using contracting, family councils, natural and logical consequences, behavior modification and self-enhancement activities to give recognition to their child's uniqueness.

Some of the children referred also experienced academic achievement problems. Team evaluations, including the I.E.D. psychologist, speech therapist and emotionally handicapped specialist, provided a comprehensive social/emotional/academic program for these children. The emotionally handicapped specialist was instrumental in following through on these recommendations.

Objectives:

1. To evaluate approximately 55 referred emotionally handicapped children.

Evaluation: A list of those children referred will be kept. In addition, the social/emotional/academic checklist or the Walker Problem Behavior Identification Checklist will be given to all children on a pre-posttest basis.

Results: Evaluations were completed on 58 children; 37 children received pre/posttests and were discharged from the program. Three children were in on-going programs at the end of the school year and will be continued in the program next fall.

Of the remaining 18 children evaluated, 2 revealed no emotional problems, 2 had improved by the time the referral was made and support was given to the school and family but no intervention plan was necessary, 4 had possible learning disabilities (no emotional problems) and were referred to other services, 4 moved and 6 were referred too late in the year for intervention and will be followed-up next fall.

A list of children was maintained in the form of a log chart. Progress towards completion of the intervention and follow-up services could be easily referenced at a glance; completion dates were recorded daily and sent to the building coordinators or principals for their information. In addition, a running log with dates of what actually transpired in all the strategies was maintained at the I.E.D. office. This was particularly handy for quick recall by the project staff in handling as many as 44 intervention programs at once.

2. To provide direct assistance to approximately 55 emotionally handicapped children who exhibit deviant behavior.

Evaluation: For selected children, baseline data will be collected on a target behavior, intervention strategies will be planned and implemented and probes will be taken to monitor the maintenance of the specified behavior.

For other children, a statement will be provided describing alternative treatment strategies which do not involve the baselining and treatment of target behaviors. The impact of these alternate treatment strategies will be measured by noting significant changes on the pre- posttest measure utilized in objective #1.

Results: A total of 53 training programs were run for 44 children. The breakdown, according to types of intervention plan, was as follows: Counseling - 13, Individual behavior programs - 17, Teacher strategies - 13, and Home intervention plans - 10.

Eighty-seven percent of the programs completed indicated significant improvement on the posttest evaluation. Twenty programs were baselined and showed 100% improvement. Thirty-three programs were only pre- and post-tested and 26 showed improvement.

Third Party Evaluator's Comments:

In reviewing the data submitted by the project staff for objective #1 it becomes apparent that this objective has been met. The project staff exceeded the number of evaluations required (55).

Objective #2 was measured by 46 of 53 programs written and implemented and considered successful by the project. The third party evaluator would like to comment on the pre- posttest results of the Walker Problem Behavior Identification Checklist. The increase or decrease of a score for a child, as completed by the teacher, indicates a change in the teacher's attitude toward the child. More reliable data in child behavior change would be actual counting of that behavior over time before, during and after intervention.

The third party evaluator would like to thank the project staff for the timely completion of the final report.

Title of Project: Preschool Education for the Deaf

Location of Project: Salem Regional Facility for the Deaf

Population Served: 30 Hearing Impaired Children

Funding Allocated: $25,000

Project Beginning Date: August 30, 1976

Project Ending Date: June 30, 1977

Background and Rationale:

This project was undertaken to facilitate the acquisition of skills in preschool hearing impaired children in five program areas by teaching their parents to stimulate development.

The normal acquisition and development of language occurs to a large degree in the natural home environment with the child's parents, other family members and friends providing the developmental model. Language development in the hearing impaired child is central to academic success. A home program was chosen to capitalize on: (a) utilizing the child's daily environment to teach skills; and (b) delivering services to the rural population in a convenient location, their homes.

The Title VI-B grant provided funds for local parent advisors to make weekly home visits that were programmed and supervised by the region coordinator. Prior to this project, this type of service was available in only one of the 19 counties currently being served.

Methodology:

This project was initially modeled after Project SKI*HI (a statewide program for identification and language facilitation for hearing handicapped children through home management) from the State of Utah. Numerous modifications in the format were made by the end of the year to accommodate our administrative philosophy and need.

The coordinator was responsible for doing initial public relations in the 19 county area by contacting all IED's and County Health Departments and obtaining referrals. She developed and adapted behavioral objectives for five program areas with the help of a consultant. She selected and provided training and supervision for local parent advisors through workshops, phone calls, letters and observation of home visits. The coordinator processed referrals, did initial evaluations if necessary and assigned parent advisors.

Quarterly staffings of each child were held. The coordinator holds Master's degrees in audiology and education of the hearing impaired with special training in language development and preschool education.

The parent advisors were responsible for making weekly home visits to train parents to administer programs. Parent advisors made new earmold impressions as necessary. When a child was identified for service, the most qualified person in the area was located and trained to become a parent advisor. The parent advisor was contracted with to provide two hours of service per week for each child served. In two cases, visits were made twice a week to the home, providing four hours of service per week. By the end of the year, twelve parent advisors (P.A.'s) were visiting homes weekly. Six had master's degrees; two teachers of the deaf, two educational audiologists, two speech pathologists. Five P.A.'s held bachelor's degrees in education with additional course work toward master's degrees in special education and one P.A. had experience as a teacher's aide in special education.

Parent education training consultants were used by the coordinator and some parent advisors to plan and develop programs and improve their skills.

The psychologist conducted parent group sessions in the Salem area and was available for consultation to the P.A.'s or families and for program planning in the behavior management area. The psychologist holds a Ph.D. in clinical psychology and specializes in working with hearing handicapped individuals and their families.

The total number of children served was 30. The initial caseload was eight children growing to 23 by the end of the project year. Seven other children received service during the year but terminated the program for various reasons. Mothers, fathers, babysitters, brothers, sisters and grandparents received instruction and administered the programs to the children. The format for teaching a skill in the home was as follows: the objective to be worked on was introduced and discussed, the parent advisor modeled the task with the child including taking data, the parent then demonstrated the activity with the child to the P.A. The P.A. provided feedback on the parent's delivery of the program. During the following week, the parent ran the program daily until the criterion level of acceptable performance was met. On the next visit, the P.A. observed the parent running the task and recorded that data. A program for the next week was based on this post-baseline data. The process described above was followed for administration of programs in the five areas.

Children received instruction in program areas based on their individual needs. All children did not receive programs in all five areas. Most children received instruction in three of the five areas. The hearing aid orientation program was introduced first and no additional programs were added until a child wore his/her hearing aid all waking hours for two weeks. The auditory training program was added, followed by the language program. Self-help and behavior management programs were initiated any time following the hearing aid orientation program but were infrequently run. In addition, loaner aids and earmold impressions were provided so the child received optimum amplification at all times.

Families were presented the opportunity to learn sign language in their homes via 17 video-taped lessons. A video player was attached to the family TV. Over 600 signs were taught in the lessons.

Data is reported on 18 children in all areas. We experienced a rapid increase in children at the end of the year. Many had been in the program less than six weeks by the end of the project. Since visits were made once a week, they had barely started into the programming. Contacts were lost with two children so that posttests could not be administered.

Objectives:

1. Each child or parent will complete a hearing aid orientation program.

Evaluation: The hearing aid program will be broken down into phases. Each phase has its own criterion level of acceptable performance. The number of phases on which the child or parent met criterion level will be documented.

Results: All children participated in the hearing aid orientation program. Some completed it prior to the beginning of the project. Table 1, Column 1, shows the total number of steps in hearing aid orientation program each child has met on and the number of steps each child gained during the year. Posttesting indicated one child lost one skill previously acquired.

The hearing aid orientation program was based on the one developed by SKI*HI. A cover checksheet was used to chart data. Thirteen skills appear on the sheet. Progress was also recorded item by item in a log as criterion levels were met.

2. Each child in the program will complete 80% on each objective on the expressive/receptive language program.

Evaluation: The language program is broken down into small steps. Each step has its own criterion level of acceptable performance. The number of steps on which the child meets criterion level will be documented for each child.

Results: The System FORE Language Program was chosen for planning and evaluation. The program includes objectives in receptive and expressive language (semantics as well as syntax, phonology and morphology). Cover checksheets were completed for each child in January or for new children when they entered the program and again near the end of the year. The language program was the third program introduced to each child. Formal programming in language was not done on each child and was dependent on length of time in the program.

Checksheets were administered using the System FORE Test with one exception. If a child used sign language as part of the total communication system for language, all directions and test items were given using total communication. Responses to items in strands 2, 3 and 4 were excepted if speech, signs or a combination of both were used. Strand 1, phonology, required a verbal response.

Table 1, Column 3, shows the total number of steps on which the child has met criterion, the date, and the number gained during the year.

3. Each child will meet the criterion level of acceptable performance of 80% on each of the steps on an auditory training program.

Evaluation: The auditory training program will have a number of small steps. Each step will have a criterion level of acceptable performance. The number of steps on which each child makes criterion level of acceptable performance will be documented.

Results: The auditory program was based on one outlined by SKI*HI but written into steps. A cover checksheet was developed to chart progress at periodic intervals. Steps were possible in this program. A log was kept recording progress step by step.

All children participated in the auditory program. Table 1, Column 2, shows the total number of skills each child had at the end of the year and the number gained during the year. As the data indicates, three children received programming but did not gain any skills. These children do not appear to have any measureable hearing. Audiological evaluations support this data.

4. Each child will develop the self-help skills dictated by the child's parents as being necessary.

Evaluation: The Teaching Research Programs to Self-Help Skills will be administered to each child as requested by the parents. These programs are broken down into small steps. Criterion levels for acceptable performance have been established for each step. The number of steps on which each child met criterion level will be documented. The number of programs each child completed will be documented.

Results: All children were evaluated in the area of self-help skills using the self-help checklist from the Portage Project. Very few formal self-help programs were run. Most children were found to be at age level during the baseline evaluation and progressed as their ages increased at a normal rate. Development of self-help skills was discussed with each family and suggestions were given informally. Three children who are lowest in this area have additional physical problems and see an occupational therapist on a regular basis. It was felt their needs were being met adequately.

Data collected in this area are summarized in Table 1, Column 4.

5. When appropriate to reduce and/or eliminate the socially unacceptable behaviors that are observed in the child by the parents and the trainer.

Evaluation: Baseline data will be taken. The intervention program will be initiated and daily data will be accumulated. The program will continue until criterion has been reached. The number of behaviors reduced and/or eliminated will be totaled.

Results: All parents were given the opportunity to express concerns in this area. Parent advisors were asked to discuss behavior management techniques and ask if the parent wanted to run any formal programs. Five programs were run, three of which were successful. Baselines were taken on several other behaviors, but treatment in the form of a program was not indicated. This was the weakest link in our program. More programs should have been run in the area in the coordinator's estimation, but lack of experience in this area by the parent advisors and the coordinator hindered it. Data collected are summarized in Table 1, Column 5.

Table 1

Summary of Total Skills Acquired By Area and Number Gained During Project Year

Child	Hearing Aid Orientation		Auditory Training		Language System FORE		Self-Help Skills		Behavior Management	
	Total	Gain	Total	Gain	Total	Gain	Total	Gain	Total	Gain
1									0	0
2	12	4	76	31	86	1	100	4	0	0
3	9	1	0	0	14	-	97	3	2	2
4	7	-	12	2	--	-	70	-	1	0
5	12	0	44	2	31	4	84	5	0	0
6	9	0	20	8	4	1	12	0	0	0
7	12	10	55	2	156	5	98	2	0	0
8	6	- 1	3	3	25	2	50	13	0	0
9	11	10	17	17	18	12	41	2	0	0
10	9	7	4	4	1	0	9	0	0	0
11	12	6	3	3	59	3	98	2	0	0
12	12	0	45	16	67	4	102	0	1	1
13	8	6	62	2	45	6	74	-	0	0
14	9	0	0	0	34	34	30	28	0	0
15	11	0	51	1	32	11	60	10	0	0
16	10	9	88	30	44	-	64	12	0	0
17	12	5	73	5	59	2	86	--	1	0
18	9	1	0	0	28	8	41	21	0	0

Third Party Evaluator's Comments:

In reviewing the data submitted by the project staff one sees that the objectives have been met.

Table 1 contains all of the data required for each of the five objectives. For Objective 1 (Hearing Aid Orientation) 10 of the 18 children acquired skills in this area. In the area of auditory training, 14 of 18 children made gains. Under the columns for Language System FORE and Self-Help Skills gain can be seen for most of those children enrolled in the program.

The third party evaluator would like to thank the project staff for the successful completion of the first project year and a well written final report.

Title of Project: Preschool Language, Speech and Hearing Services

Location of Project: Salem Public Schools

Population Served: Four and five year old language, speech and hearing impaired

Funding Allocated: $35,000

Project Beginning Date: August 31, 1976

Project Ending Date: June 30, 1977

Background and Rationale:

Many problems which develop later in school can be avoided if early identification and remediation procedures are initiated. Children who are handicapped by impairments of language, speech and/or hearing are among those for whom early intervention is most vital. To reach these children in their preschool years with direct service and parent consultation could enhance their school readiness and effectively reduce later caseloads.

Because we do not have public kindergartens, most of our students are not met until they enter as six year olds. Exceptions are those who are included in special programs such as Head Start, Title I, or the Developmentally Delayed Preprimary Program. Each year a number of preschool children are referred by the Crippled Children's Division of the University of Oregon Medical School, local pediatricians, the Marion County Health Department and other agencies. These children had received services through the public school language, speech and hearing program until complexities of the new equal opportunities provisions were noted. It appeared that we could not provide services to a selective group of preschoolers unless we were prepared to provide for all children of that category who might quality for service.

The Title VI-B project was written to apply for supplemental funds to avoid dropping this minimal service and to offer a needed service for additional four and five year olds. The overall purpose of the program was "to provide language, speech, and hearing services to handicapped preschool children and to improve their readiness for school through early intervention in these areas."

Methodology:

Two speech clinicians were added to the staff allowing approximately 20 percent more staff time per elementary school. This time totaling two FTE was available for service from 10 speech clinicians to four and five year old children in their own neighborhood schools. Some transferring occurred to reduce the concentration of students at a few buildings. One half-time clerical aide was provided to assist with supplies material preparation and records management.

Parents were alerted through newspaper articles. radio spot announcements, a television interview. fliers sent home from school, Community School bulletins, the 4-C (Community Centered Child Care)-Linkline (with a half day inservice presented to day care providers), and notices supplied to the Association for the Education of Young Children and the Marion County Health Department. All were invited to call the neighborhood elementary school and arrange an appointment with the speech clinician. Children were admitted from September through March with the majority "signing up" in October and November. Those entered after spring vacation were not included in the pre and posttest data submitted. Months in the program ranged from one (one child) to eight and averaged five months for the 53 children reported. Of 78 children, 53 entered and remained through posttesting; eight were referred on to other more extensive services; four were known to have moved; three started but did not continue; three were maintained for consultation only; and seven were continuing from prior programs. Records were not maintained for students screened and found not to be appropriate candidates for the program such as those with minor developmental inaccuracies of articulation. A single parent consultation was held in those instances.

Objectives:

For reporting and evaluation purposes, the project goals and evaluation plan were restated as quoted below.

1. To increase receptive and expressive language skills in selected preschool children.

Evaluation: The STEP and BOEHM Test of Basic Concepts will be administered on a pre- posttest basis. The pretest will be administered 21 days after the initial contact with the Title VI-B staff. The posttest will be administered prior to the child leaving the program or no later than May 31, 1977.

Results:

Table 1
Mean Pre- Posttest Student Scores for the
BOEHM and STEP
N=53

Test Results	BOEHM TBC		STEP (Union Co.)	
	Raw Score # correct	% Correct of possible	Raw Score # correct	% Correct of possible
Pretest	28.74	58.32	56.63	60.21
Post test	34.93	70.01	71.79	75.26
+ or -	+ 6.19	+11.69	+15.16	+15.05
% gain over pretest	+21.50%	+20.00%	+26.70%	+25.90%

Gains of 21% above entry performance were demonstrated on the Basic Concepts with gains of 26% over entry level on readiness skills measured by the STEP. (Both of these are language related but may not have been the best choices for measuring the objectives as stated in the above form.)

Programs were individually planned for students including concept and language development activities and instruction specifically related to the space, time and quantity areas covered in the Boehm Test of Basic Concepts. Locally prepared materials were used in reference to this area as well as commercial items and programs. When specific deficit areas were noted on the STEP test, corresponding materials were selected from the Diagnostic and Prescriptive Curriculum Manual of the Union County IED Early In Project. These were utilized as a part of the language and speech activities and/or supplied for home follow up activities.

2. To increase the articulation skills in selected children.

Evaluation: The Salem Developmental Articulation Inventory will be administered to each child enrolled in articulation programs on a pre-posttest basis. The same time lines that were specified in Objective 1 will apply to this objective.

Results:

Table 2
Mean Pre- Posttest Student Scores for the
Salem Developmental Articulation Inventory
N=53

Test Results	Salem Developmental Articulation Inventory	
	Raw Score # Correct	% Correct of possible
Pretest	42.84	62.04
Post test	51.92	75.06
+ or -	+ 9.08	+13.02
% gain over pretest	+21.10%	+20.90%

Gains of 21% over entry performance were averaged by the 53 children who averaged five months in the program. This could be interpreted in a very general way as suggesting that youngsters misarticulating about nine phonemes in intial, medial, and final positions had corrected at least three phonemes in three positions in the five month period.

Third Party Evaluator's Comments:

The project staff is to be commended for submitting a timely and concise report.

In reviewing the data for the objectives and the evaluation strategies it becomes apparent that the objectives have been met.

Tables 1 and 2 display data that indicate adequate gains were made by the children enrolled in the project.

The project staff certainly addressed a serious problem confronting most school districts. A procedure for early intervention for language, speech and hearing impaired preschool children is most desirable. This third party evaluator would like to encourage any future efforts made by the district to continue the program for children 0-6 years.

Title of Project: Therapy for Emotionally Disturbed Children

Location of Project: Springfield School District #19

Population Served: 31 Seriously Disturbed Children

Funding Allocated: $10,000

Project Beginning Date: September 1, 1976

Project Ending Date: June 15, 1977

Background and Rationale:

It has been the policy of Springfield School District #19 to enroll a child in as normal a school setting as possible. However, there are some children with serious emotional problems that the district has been unable to maintain in a regular classroom. The district has maintained a small class for teenage disturbed students for seven years and a small class for disturbed children of primary school age for four years. In addition, Title VI-B funding permitted the operation of a class for CA 10-12 year old emotionally disturbed children for the school years 1974-75 and 1975-76. This class became part of the district program in 1976-77. In all three of the classes it was noted that a great need existed for consistent individual therapy for each student and the therapy should be closely coordinated with the activities of the classes. Outside agencies did not supply this type of help. When the class for 10-12 year olds was refunded by Title VI in 1975-76, a clinical psychologist was added to the project, providing individual therapy to selected children. This aspect of the program proved to be quite successful. The Title VI-B funding provided the district with a counseling therapist for all three classes for the 1976-77 school year. The decision of the district to have this therapist serve all three classes was based on the success achieved during the 1975-76 school year.

Methodology:

This project provided a counseling therapist at .6 FTE for 36 weeks. She had a Ph.D. in counseling therapy. Her time was distributed evenly between the three classes for seriously emotionally disturbed children, giving each class approximately eight hours of service per week. There were no more than a total of 24 students at any one time being served by the therapist. All three teachers of the classes were experienced teachers, had taught their classes last year, and held an ELP norm as well as having had course work in behavioral problems.

The therapist provided individual therapy at the school once per week to each child who was not otherwise being seen by a therapist from an outside agency. She met with those being seen by an outside therapist on an informal basis and in coordination with the outside therapist. In addition, the therapist met with parents on an individual basis as needed and assisted the classroom teacher in conducting parent-child group sessions once per week. The therapist and the classroom teacher tried to work closely together to insure carry-over into the classrooms.

Objectives:

1. The therapist will estabish goals for each student enrolled in the ED classes.

Evaluation: Twenty students were evaluated on the Walker Problem Behavior Identification Checklist in January and again in June.

Results: Six students had problems in three areas, seven students had problems in four areas, and seven students had problems in five areas. Five students showed significant decrease in more than 80% of their individual problem areas. Table 1 shows the percentage of the students having significant problems in the five categories listed from the Walker Checklist and the percentage of those having those particular problems who either improved, stayed the same or regressed.

Table I
Results of Behavior Change as Indicated
by Walker Checklist
January 1977 - June 1977
N=20

Behavior Categories	Had Problem	Improved	Same	Regressed
Acting Out Behavior	100%	55%	25%	20%
Withdrawal	80%	69%	18%	13%
Distractibility	95%	63%	16%	21%
Disturbed Peer Relations	80%	63%	19%	18%
Immaturity	95%	63%	16%	21%

According to the above figures, gains were made by half to two-thirds of the children in each of all five behavioral areas.

All students were subjectively evaluated at the beginning of the year or at the time they entered the class. Goals were set for each student. While there were no more than eight students in each class at one time, due to mobility and flexibility of programming, considerably more were served during the year. Each class had a slightly different approach to goal setting. The following lists are in descending order of frequency of similar goals for the group of children.

Goals Primary Class N=7	% of students having that goal	% having goal who achieved goal
1. Express feelings in appropriate ways.	40%	100%
2. Increase thoughtfulness toward peers both verbally and physically.	40%	100%
3. Decrease explosive anger reactions.	20%	100%
4. Eliminate socially unacceptable behaviors such as anal noises, profanity, masturbation.	20%	100%

Goals Primary Class (con't) N=7	% of students having that goal	% having goal who achieved goal
5. Stop stealing.	20%	100% (for last 2 mo.)
6. Learn non-disruptive ways of gaining attention.	20%	0%
7. Ignore inappropriate behaviors in others.	20%	0%
8. Interact with adults in socially acceptable way.	20%	0%

As can be noted, three of the goals were not achieved by any of the pupils.

Goals Intermediate Class N=13	% of students having that goal	% having goal who achieved goal
1. Be able to accept individual and small group instruction designed to assist him in meeting grade level competencies in language arts and math.	69%	55%
2. Develop appropriate communication skills.	46%	50%
3. Be able to accept responsibility for his own actions.	48%	40%
4. Be able to participate in cooperative work-play.	31%	50%
5. Be able to work on or complete a task during assigned work period.	23%	33%
6. Be able to solve problems through group process rather than threaten persons he/she is angry with.	23%	33%
7. Attend school regularly.	15%	100%
8. Work toward integrating into P.E. and math class at appropriate grade level.	15%	100%
9. Eliminate immature "game playing" behavior.	15%	100%
10. Learn and follow simple rules of hygiene.	15%	50%
11. Be able to work independently without excessive teacher assistance.	7%	0%

Goals Intermediate Class (con't) N=13	% of students having that goal	% having goal who achieved goal
12. Be able to leave real or imagined past wrongs behind.	7%	0%
13. Improve ability to make wise choices.	7%	100%
14. Develop a sense of trust so that he/she will be able to verbalize problems.	7%	100%
15. Become aware of and develop respect for his/her own person.	7%	100%

Two of the goals were not achieved by any of the pupils.

Goals Secondary Class N=14	% of students having that goal	% having goal who achieved goal
1. Will participate in group discussions and activities.	7%	100%
2. Will complete assignments in time allotted without disrupting activities of other students.	21%	100%
3. Will work independently of teacher.	7%	100%
4. Will maintain X number of junior high classes.	64%	44%
5. Will ask for help appropriately when needed and allow others to help him.	7%	100%
6. Will improve social communications/ interact appropriately with others.	35%	30%
7. Will make responsible decisions regarding school and home.	7%	0%
8. Will try to solve problems rather than ignoring, avoiding or denying them.	14%	0%
9. Will accept consequences for irresponsible behavior.	7%	50%
10. Will accept therapy time for problem-solving.	7%	50%
11. Will attend school regularly.	43%	18%
12. Will control anger when disturbed by the behavior of others.	7%	0%

Goals Secondary Class (con't) N=14	% of students having that goal	% having goal who achieved goal
13. Will eat lunch in the junior high cafeteria one day each week or each day.	14%	50%

Three of the goals were not achieved by any of the students.

2. To increase the length of time each child spends in the regular classroom.

Evaluation: Logs were kept specifying the amount of time spent in the regular classroom by each pupil.

Results: Thirty-one students were enrolled in the three classes at some time during the year. Of these 31 students, no child beginning with 0% integration achieved 100% integration at the end of the year. However, six children who ranged from 21% to 66% beginning integration achieved 100% integration. Three children regressed from partial integration to 0% integration, while one child remained the same. All of the other 21 children increased the amount of time spent in the regular classroom.

Third Party Evaluator's Comments:

This project successfully met the two objectives set. The therapist set goals for the children served through the use of the Walker Behavior Identification Checklist and by subjective evaluation. In reviewing results of both measures, improvement can be noted. One half to two-thirds of the children served showed improvement on the Walker Checklist while the majority of the subjective goals were met in all classes.

The project was successful in increasing the length of time each child spent in the regular classroom. Only four children out of the 31 served failed to increase their time in the regular classroom. Six children were integrated 100% of the time in a regular classroom environment.

Title of Project: Middle School Program for Identified Severely Learning Disabled Students

Location of Project: Reynolds School District #7 Troutdale

Population Served: 18 Learning Disabled Children

Funding Allocated: $27,000

Project Beginning Date: August 23, 1976

Project Ending Date: June 17, 1977

Background and Rationale:

In the Reynolds School System a variety of educational programs are provided from kindergarten through grade 12 for handicapped learners. However, with the 1976 merging of Rockwood and Reynolds School Districts from the seventh grade through the secondary levels, existing gaps in services for the handicapped were revealed. While classes for learning disabled students were available through the sixth grade, the need for expanded learning disability programs at the middle school level became evident. Through conferences with regular and special teachers and parents, Metropolitan Achievement Test results, enrollments in learning disability class through the sixth grade, and Title I learning center enrollments, it was determined that a critical need within the Reynolds Schools was for a learning disablity class at the middle school level to provide continuity of learning for previously identified children who needed special help and specialized methods of instruction.

Methodology:

In an attempt to assist identified learning disabled students at the middle school level in their adjustment to and benefit from regular school programs, a learning disabilities resource room was developed to provide specialized instruction in math, language and related curricular areas as necessary. Students that were referred, screened and accepted, were assessed for current functional level and subsequent instructional programming. Students were included in the resource room for two or more class periods, based upon their individual learning difficulties and instructional needs.

The learning disabilities teacher and classroom aide provided the assessment, instructional program development and direct instruction on an individual or small group basis. Further, the project teacher was available to consult with regular classroom teachers, in developing other instructional programs and/or advising for treatment of learning or behavioral problems of the learning disabled student in curricular areas which instruction was not provided in the resource room. The teaching aide in the learning disabilities classroom was also available for assisting regular classroom teachers with the instruction of identified learning disabled students or for assisting those students in their adjustment in other classes.

Objectives:

1. To increase the skills of each child in selected areas such as reading, writing, grammar and spelling.

Evaluation: The Peabody Individual Achievement Test (PIAT) will be administered on a pre- posttest basis and the results will be recorded and reported. The Silvaroli Diagnostic Reading Test will be administered on a pre- posttest basis and the results will be recorded and reported. New behaviors acquired by each child on the minimum competency standards established by the school district will be recorded and reported.

Results: Table 1 presents the pretest, posttest and difference scores of the 13 identified learning disabled students served by the Reynolds Title VI-B Middle School program. An additional five students were also served in the program but were served for shorter periods of time. They did not have all the pre and posttesting and are thus not included in these data. Of the 13 students who were served for five or more months in the program, two students withdrew from school, leaving 11 students for whom pretest, posttest and difference results exist. As evidenced by the data in Table 1, five of those students scored higher on the math section of the PIAT at posttesting than they did at pretesting; 4 students actually scored lower at posttesting and two students demonstrated no change. It is important to note that late arrival of the PIAT materials in the Fall 1976 resulted in a three month delay in pretesting. Consequently, there may well have been larger gains by those students who improved their math skills over the school year, as well as measurable increases by the two students who actually demonstrated no change.

Table 1 reveals that in the other sections of the PIAT, posttest results demonstrated more positive results (increases) in the differences between pretest and posttest scores. A total of 8 students were measured to have improved their reading recognition and reading comprehension skills, 7 improved their spelling skills, and 9 improved their general information skills. Although a small number of students made gains in 1 to 5 years during involvement in the program, the majority demonstrate skill gains of from 2 to 8 months during that period.

The results of three administrations of the Silvaroli Individual Reading Inventory are presented in Table 2. The 12 students for whom data are reported were in the program from 6 to 9 months. Again, the individual gains as measured by the Silvaroli IRI were variable, ranging from no gain to 3 years gain during the 8 month period between pre and posttesting. The results as reported in Table 2 indicate that at least 9 of the students scored a year of more higher on the Silvaroli IRI posttest administration in May than they did the previous September.

Individual student competencies gained during the 1976-77 school year, as measured by the Reynolds School District Competency Skills Checklist, are reported in Table 3. In the math area, 9 students acquired a total of 111 new competencies for an average competency gain per student in excess of 12. In spelling, 695 new words were learned across 7 students for an average of almost 100 newly learned words. Only one student was provided general language arts studies and acquired 19 new competencies in the area. The average number of competencies gained in research and vocabulary areas was approximately 15 and 81 competencies respectively.

2. To assist children to function appropriately in the regular classroom.

Evaluation: The number of classes that each child maintains a C average or above and the number of children that drop classes and return to the special class will be recorded and reported.

Results: Table 4 presents the outcome of the learning disabilities program that were returned to regular classrooms. Of the 13 students for whom data are reported, 12 students were returned to a total of 30 regular classes. Of those 30 returns to regular classes from the learning disabilities classroom, 24 were successful and remained in the regular class. In 21 of those 24 instances the students were able to maintain a C grade average or above after replacement into regular programs; in four instances the students were maintained in the regular class but were unable to maintain at least a C grade average. Of those six regular classroom placements that ultimately returned to the learning disabilities classroom, 3 did so because of behavior problems and 3 because of academic failure.

Third Party Evaluator's Comments:

Based upon the two stated/funded objectives of the Reynolds Title VI-B learning disabilities program at the Middle School level, the evaluative data indicate that those objectives were achieved. That is, the project demonstrated that (1) student skills were indeed increased in such areas as reading, writing, grammar, spelling and math; and (2) students returned to regular class placement were successfully maintained in those placements.

Had initial difficulties in operational procedures not occurred there may well have been even more successes in academic gains by and/or regular class placements of students served in the learning disabilities classroom. Initial problems included (1) delayed receipt of curriculum materials for the program; (2) delayed receipt and thus administration of the PIAT; (3) instances in which the assistant teacher was left to teach regular classes in which learning disabled students were enrolled, and (4) requests of the learning disabilities class teacher to perform initial screening and diagnostic work that was intended for building psychologists. The probable results of the delayed receipt of the curriculum and PIAT materials are clear. However, the latter two problems resulted in loss of direct planning, instructional and evaluative time of both the teacher and assistant teacher that could hsve been more appropriately spent in direct instructional services to project students. Fortunately, each of these four problems were corrected during the first half of the school year.

In summary, the learning disabilities program was able to function, for the most part, as intended and produced demonstrative academic and adjustment gains in project students. The teacher and assistant teacher worked intensively with 13 students who were in the program for six or more months; five other students were served in the program for lesser periods of time. Reynolds School District administration indicated that longitudinal data covering several years of the student's academic progress showed project students to have made comparable and in many instances accelerated gains compared to previous years.

Table 1

Individual Student Pretest, Posttest, and Difference Scores on the Peabody Individual Achievement Test (PIAT)

Students	Months in Program	Math			Reading Rec			Reading Comp			Spelling			General Info		
		Pre	Post	Diff	Pre	Post	Diff	Pre	Post	Diff	Pre	Post	Diff	Pre	Post	Diff
1	8	5.3			4.7			5.3			5.6			5.0	Withdrew	
2	9	2.9	3.5	.6	2.6	2.4	.2	2.5	2.8	.3	3.5	3.4	- .1	3.8	2.4	-1.4
3	9	4.4	4.9	.5	5.0	5.2	.2	5.5	4.2	-1.3	3.8	2.5	-1.3	4.8	4.4	- .4
4	9	3.8	3.8	0	2.8	3.4	.6	2.4	3.2	.8	4.4	5.3	.9	2.4	4.0	1.6
5	9	7.6	7.0	- .6	3.3	4.1	.8	4.5	8.8	4.3	3.5	2.8	.7	6.8	7.2	.4
6	9	4.2	6.0	1.8	2.4	2.2	.2	2.6	3.4	.8	3.0	3.3	.3	5.1	4.7	.4
7	9	4.6	9.6	5.0	4.2	4.1	- .1	6.2	4.5	1.7	2.7	1.7	1.0	6.8	8.2	1.4
8	9	3.7	3.0	- .7	7.9	7.0	- .9	6.0	3.9	-2.1	4.9	6.0	1.1	4.0	4.5	.5
9	6	5.7			3.1			3.3			3.6			4.5	Withdrew	
10	9	6.0	5.7	- .3	3.0	3.1	.1	2.8	2.2	- .6	3.3	2.7	- .6	3.8	4.3	.5
11	9	3.5	3.3	- .2	2.2	2.4	.2	2.1	2.2	.1	2.9	1.6	-1.3	6.0	6.0	0
12	6	3.7	5.7	2.0	3.9	3.9	0	2.7	3.2	.5	4.2	4.9	.7	3.0	4.4	1.6
13	8	4.4	4.4	0	4.4	5.0	.6	3.9	4.5	.6	4.2	4.6	.4	4.5	5.1	.6

Table 2

Individual Student Scores on Three Forms of the Silvaroli Individual Reading Inventory (Instructional Level)

Student	Months in Program	Sept.	Jan.	May	Total Gain (Sept to May)
1	8	6	6-7	---	½-1 year
2	9	1	3-4	2	2 years
3	9	5	---	5-6	½ year
4	9	2-3	3	3-4	1 year
5	9	4-5	5-6	7-8	3 years
6	9	1½	1-2	2½-3	1-1½ years
7	9	7	-8	Above 8	1 or more years
8	9	6-7	6-7	7-8	1 year
9	6	pp	3-4	---	3 years
10	9	2	2	2	0
11	9	p	2-3	2	2 years
12	6	Not Applicable			
13	8	5-6	6	7-8	2 years

Table 3

Individual Student Scores on Program's Specific Competency Skills Checklist

Student	Math		Spelling		L.A.		Research		Vocab*
	Pre	Acq	Pre	Acq	Pre	Acq	Pre	Acq	Acq
TOTAL	55		191		66		40		--
1	Not Applicable - Mainstreamed for These Areas.								
2	6	11	12	74	NA		NA		101
3	6	8	NA		NA		2	7	NA
4	6	25	3	162	NA		1	10	105
5	6	15	66	101	NA		NA		NA
6	7	14	9	78	NA		NA		99
7	NA		43	125	NA		4	19	NA
8	4	3	NA		NA		NA		NA
9	14	12	NA		NA		NA		83
10	NA		31	97	NA		NA		203
11	4	8	0	58	NA		NA		92
12	6	15	NA		NA		NA		NA
13	NA		NA		11	19	2	23	NA

NA = Not applicable; this area not taught due to reading ability or was mainstreamed for the skill.

* = Vocabulary is taken from several lists and from books, only number of words learned is possible to record.

Table 4

Success of Mainstreamed Students

Student	LA	Reading	S.S.	Sci	Math	Classes Main.	Classes Dropped
1	M	B	_	_	M	2	1
2	_	_	_	D	D	0	2
3	M	_	_	M	_	2	1
4	_	_	_	M	_	1	0
5	B	_	_	_	B	0	2
6	_	M	_	_	D	1	1
7	M	M	_	M	M	4	0
8	M	M	_	_	_	2	0
9	_	_	_	_	_	_	_
10	_	_	_	L	M	2	0
11	_	_	L	_	_	1	0
12	M	M	M	L	M	5	0
13	M	M	M	M	_	4	0

M = Student placed in regular class and maintained a C grade average.
L = Student placed in regular class but maintained less than C average.
D = Student placed in regular class but returned to resource class because of academic failure.
B = Student placed in regular class but returned to resource class because of behavior problems.

Title of Project: Itinerant Teacher of the Hearing Impaired in Malheur County

Location of Project: Malheur County IED
Vale, Oregon

Population Served: 3 Deaf and 15 Hearing Impaired Children

Funding Allocated: $21,677

Project Beginning Date: August 23, 1976

Project Ending Date: June 1, 1977

Background and Rationale:

In the fall of 1973, the project providing service to the hearing impaired children of Malheur County was initiated and funded under Title VI-B. The project provided funding for an itinerant teacher to serve these children. In 1975-76, the project was expanded to include those mentally retarded children who also had a hearing loss. The total enrollment in 1976-77 was 18. One preschool child and one elementary child moved from the area in early fall of 1976. In late spring two elementary children enrolled in the program. Funding for this project under Ti[illegible] VI-B to serve the hearing impaired children is now in the fourth year. Without these funds for this project the hearing impaired children of Malheur County would not have been able to receive the services needed to assist them in the pursuit of their educational needs in regular classrooms.

Methodology:

The project staff for 1976-77 consisted of one certified teacher for the deaf and hearing impaired and one aide who was also a speech therapist. A total auditory approach was used after the initial assessment was established through System FORE. Prescriptions and objectives for the school year were written for each child. All children were served on a one-to-one basis. These yearly objectives were subdivided on a monthly and weekly basis with a specific goal to be attained by each child according to age level and capabilities within a reasonable time. Equipment and materials used were those especially developed for an auditory program for the hearing impaired. Mastery dates were noted and recorded.

Objectives:

1. To provide selected hearing impaired children training in the following selected areas: basic skills, auditory discrimination, and receptive and expressive language.

Evaluation: Collect and analyze data on student progress using behavioral checklists.

Results: The System FORE Language Inventory, the Sequence Checklist and Language Cover Sheet were used to collect and analyze data on student progress. Table 1 shows the Language Sequence Checklist where items checked were mastered. It also displays pre and post data of levels used. "X" shows mastery, "Ⓧ" shows items at first failed and then mastered. Table 2 shows final scores for each pupil for Level 4 with differences of gains or losses. "-" shows that the child has not arrived at this level. Contained in Table 3 are the results of the Wepman Auditory Discrimination Test which was used for the elementary students.

2. To increase the discrimination skills of selected high school students.

Evaluation: A selected discrimination test will be administered, and the results for each student will be recorded and reported.

Results: Three high school students were given the Diagnostic Discrimination Test, Part I (consisting of 100 words on tape), by Goldman-

Fristoe-Woodcock for word discrimination. The data for the Goldman-Fristoe-Woodcock are contained in Table 4.

3. To increase the vocabulary of selected hearing impaired high school students.

Evaluation: A word list will be used to report the progress made by each student. Results of the progress made by each student will be recorded and reported. Three sets of the Vocabulary Builder Series from Language Master were used. Sets I and II contained 200 words each. Set III contained 150 words. These sets also include the definitions and pronunciations for each word.

Student #1 mastered 200 words in Set I and 175 words in Set II.

Student #2 mastered 200 words in Set I and 150 words in Set II.

Student #3 required a more basic vocabulary and mastered 200 words in the Vocabulary Building Exercise.

Third Party Evaluator's Comments:

Those data submitted by the project staff indicate that the objectives were met.

This is the fourth year that VI-B funds have provided service to hearing impaired children in Malheur County. The project staff in its usual tradition has provided excellent programming for those children that participated in the project.

It is hoped that this service to hearing impaired children will be continued by other funds when these VI-B funds are discontinued on a competitive basis.

Table 1
Los Angeles Unified School District Special Education Division Language Cover Check Sheet for Project Students

N=11 Level 4

		Student #1	Student #2	Student #3	Student #4	Student #5	Student #6	Student #7	Student #8	Student #9	Student #10	Student #11
	PHONOLOGY (Sound System)											
1.4.1	Uses words with initial,medial,final consonants	X	X	X	X	X	X	X	-	X	X	X
1.4.2	Discriminates differences in sounds in similar words (bat/cat)	X	X	X	X	X	X	X	-	ⓧ	X	X
1.4.3	Increases ability to blend sounds	X	ⓧ	X	X	X	X	X	-	X	X	X
1.4.4	Repeats melody patterns	X	ⓧ	ⓧ	X	X	X	X	-	X	X	X
1.4.5	Uses contrast in word stress	X	ⓧ	X	-	X	X	X	-	X	X	X
1.4.6	Copies right oblique line	X	X	X	-	X	X	X	-	X	X	X
1.4.7	Copies a cross	X	X	X	-	X	X	X	-	X	X	X
1.4.8	Draws at least 2 recognizable forms	X	X	X	-	X	X	X	-	X	X	ⓧ
	MORPHOLOGY (Inflections & Derivational Forms)								-			
	SYNTAX (Sentence Structure)											
2-3.4.1	Begins to use auxiliary verbs (is flying,is walking)	X	0	X	-	X	X	X	-	X	X	X
2-3.4.2	Uses derivational endings of nouns (farm/farmer)	0	0	X	-	X	X	X	-	X	X	X
2-3.4.3	Uses comparative form of adjective (big/bigger)	X	0	ⓧ	-	X	X	X	-	ⓧ	X	X
2-3.4.4	Uses singular and plural nouns correctly(ball/balls)	X	0	ⓧ	-	X	X	X	-	ⓧ	ⓧ	X
2-3.4.5	Uses noun-verb agreement(The cat plays. The boys run)	X	ⓧ	X	-	X	X	X	-	X	ⓧ	X
2-3.4.6	Uses complete simple sentences beginning with: there, it, this, here	X	X	X	-	X	X	X	- -	X	X	X
2-3.4.7	Uses complete simple sentences ending with locator (here, there) or adjective (good, red)	ⓧ	X	X	-	X	X	X	-	X	X	X
2-3.4.8	Separates verb from adverb (He took it off)	X	X	ⓧ	-	X	X	X	-	X	X	ⓧ
2-3.4.9	Substitutes pronoun for subject in compound sentence	ⓧ	0	X	-	X	X	X	-	X	ⓧ	ⓧ
2-3.4.10	Uses simple questions	ⓧ	0	X	-	X	X	X	-	X	X	X
2-3.4.11	Repeats sentence of 12-13 syllables	ⓧ	0	0	-	X	X	X	-	X	X	X
	SEMANTICS (Meaning)											
	Receptive											
R 4.4.1	Obeys 4 prepositions	X	0	X	-	X	X	X	-	X	X	X
R 4.4.2	Demonstrates increased understanding of cause and effect	X	0	X	-	X	X	X	-	X	X	X
R 4.4.3	Follows 3 consecutive commissions	X	X	X	-	X	X	X	-	X	X	X
R 4.4.4	Uses gesture to show action	X	X	X	-	X	X	X	-	X	X	X
R 4.4.5	Identifies body parts,using himself as a reference	X	X	X	-	X	X	X	-	X	X	ⓧ
R 4.4.6	Recognizes object pronouns (Him/her/them)	X	X	X	-	X	X	X	-	ⓧ	X	ⓧ
	Expressive											
E 4.4.1	Makes broad categorizations (food,animals)	X	X	X	-	X	X	X	-	X	X	X
E 4.4.2	Talks while he builds or draws*	ⓧ	X	X	-	X	X	X	-	X	X	0
E 4.4.3	Uses opposite analogies	ⓧ	X	X	-	X	X	X	-	X	X	X
E 4.4.4	Verbalizes an awareness of senses	X	X	X	-	X	X	X	-	X	X	X
E 4.4.5	Uses sentences 5 or more words in length*	X	X	XX	-	X	X	X	-	X	X	X
E 4.4 6	Shows auditory judgment*	X	X	X	-	X	X	X	-	X	X	X
E 4.4.7	Deals verbally with non-present situations	ⓧ	X	X	-	X	X	X	-	X	X	0
E 4.4.8	Spontaneously names pictured action	X	X	X	-	X	X	X	-	X	X	X

*Observation by teacher
-Student not at this level

ⓧ Mastery after Post Test
X Mastery
0 Failed Item

Table 2
Language System FORE Inventory for Project Students
N=11

Student #		Level															Total Diff.
		0	1	2	3	4	5	6	7	8	9	10	11	12	13		
Pre	1						72%	75%									
Post							83%	82%									
Diff.							+11%	+ 7%									+18%
Pre	2		100%	82%	97%	60%											
Post			100%	91%	94%	64%											
Diff.			0%	+ 8%	+ 3%	+ 4%											+15%
Pre	3						66%	100%	89%								
Post							95%	100%	95%								
Diff.							+29%	0%	+16%								+45%
Pre	4				58%												
Post					88%												
Diff.					+30%												0%
Pre	5			100%	88%	100%											
Post				100%	100%	100%											
Diff.				0%	+12%	0%											+12%
Pre	6										100%	100%	100%	100%	100%		
Post											100%	100%	100%	100%	100%		
Diff.											0%	0%	0%	0%	0%		0%
Pre	7											100%	100%	100%	100%		
Post												100%	100%	100%	100%		
Diff.												0%	0%	0%	0%		0%
Pre	8		72%	74%	76%												
Post			82%	100%	85%												
Diff.			10%	26%	9%												45%
Pre	9								81%	80%							
Post									100%	100%							
Diff.									+19%	+20%							39%
Pre	10							83%	100%	100%							
Post								95%	100%	100%							
Diff.								+12%	0%	0%							12%
Pre	11			86%	85%	87%											
Post				87%	94%	96%											
Diff.				1%	9%	9%											19%

Students #12 and 13 enrolled two months before close of school.
Student #14 TMR with severe LD.
Students #15, 16, 17 high school--not included in System FORE.
*EMR **TMR +++A score of approximately 80% is considered passing. Percentage scores were computed by adding total number of tasks correct in each level and dividing that figure by total number of tasks in each level.

Table 3

Wepman Auditory Discrimination Test

N = 11
Score = No. Correct
No. Items = 40

Student #	Form A Pre-test	Form B Post-Test	Difference
1	21	17	-4
2	27	22	-5
3	32	37	+5
4	30	32	+2
5	23	32	+9
6	26	30	+4
7	32	33	+1
8	15	26	+11
9	30	33	+3
10	33	35	+2
11	30	35	+5
12	25	29	+4
13	21	23	+2

Table 4

Student Pre- Posttest Goldman-Fristoe-Woodcock

N=3

Number correct:		Pre	Post	Difference
	Student #1	92		
	Student #2	97	100	+3
	Student #3	97	93	-3